

**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

Chris Lee for Congress

ADDRESS (number and street)

PO Box 15395

☐Check if different  
than previously  
reported. (ACC)

Rochester

NY

14615

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00450148

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

NY

26

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

2011

through

03

31

2011

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

Roger Upton

Signature of Treasurer

Electronically Filed by Roger Upton

Date

06

17

2011

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

A. Form/Schedule : **F3A**  
Transaction ID :

Filing amended to reflect: 1.Change in name of refund recipient 2. bank fees for month of March were added 3. Amex bill was not properly memoed 4. two donations were voided due to mistake

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

3 / 205

Write or Type Committee Name

Chris Lee for Congress

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 1 1

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 1 1

	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)).....	9513.75	1006744.77
(b) Total Contribution Refunds (from Line 20(d)).....	514003.23	514003.23
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-504489.48	492741.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	77186.35	143767.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1095.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	77186.35	142672.53
8. Cash on Hand at Close of Reporting Period (from Line 27).....	53550.35	
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

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name  
Chris Lee for Congress

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	1	1

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	2400.00	923289.80
(i) Itemized (use Schedule A).....	0.00	76318.99
(ii) Unitemized.....	2400.00	999608.79
(iii) TOTAL of contributions from individuals..... ▶	2320.00	2320.00
(b) Political Party Committees.....	4793.75	4815.98
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	9513.75	1006744.77
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
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.).....		
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	9959.67	1008804.34

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	77186.35	143767.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	100000.00	250000.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	100000.00	250000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	510503.23	510503.23
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3500.00	3500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	514003.23	514003.23
21. OTHER DISBURSEMENTS.....	0.00	1500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	691189.58	909270.76

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	734780.26
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	9959.67
25. SUBTOTAL (add Line 23 and Line 24).....	744739.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	691189.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	53550.35

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Amer. Council of Life Insurance PAC

Mailing Address JC Scott

101 Constitution Ave NW

City

Washington

State

DC

Zip Code

20001

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

C00147066

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☐ General☒ Other (specify) ▼  
Primary 2012

Election Cycle-to-Date ▼

543.75

Date of Receipt

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

Transaction ID: 10414.C33600

Amount of Each Receipt this Period

543.75

In-Kind

room rental

**B.**

Full Name (Last, First, Middle Initial)

National Fuel Gas Federal PAC

Mailing Address Mr. Michael Rose

6363 Main St

City

Buffalo

State

NY

Zip Code

14221

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

C00083758

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☐ General☒ Other (specify) ▼  
Primary 2012

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: 10203.C33555

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Price WaterhouseCoopers PAC

Mailing Address Laura Cox Kaplan

1301 K Street, NW Ste 800 W

City

Washington

State

DC

Zip Code

20005

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

C00107235

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☐ General☒ Other (specify) ▼  
Primary 2012

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: 10203.C33556

Amount of Each Receipt this Period

2500.00

Receipt

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

4043.75

**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 7 / 205

(check only one)

<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)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Scooter Store PAC

Mailing Address Mark Leita

1650 Independence Dr

City

New Braunfels

State

TX

Zip Code

78132

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

C00419937

Name of Employer

Occupation

Receipt For: 2012

☐

Primary

☐

General

☒

Other (specify) ▼

Primary 2012

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	1

Transaction ID: 10414.C33601

Amount of Each Receipt this Period

750.00

In-Kind

Fundraising expenses

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

750.00

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

4793.75

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 205

(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)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Bruce Fennie

Mailing Address 98 N Country Club Dr

City

Rochester

State

NY

Zip Code

14618-3724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bruce Fennie & AssociatesOccupation  
consultant

Receipt For: 2012

☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Election Cycle-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: 10203.C33557

Amount of Each Receipt this Period

2400.00

Receipt

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

2400.00

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

2400.00



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 205

(check only one)

<input type="checkbox"/> 11a	<input checked="" 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)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Jane Corwin for Congress

Mailing Address PO Box 15385

City

Rochester

State

NY

Zip Code

14615-0385

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☐ General☒ Other (specify) ▼  
Primary 2012

Election Cycle-to-Date ▼

2320.00

Date of Receipt

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

Transaction ID: 10416.C33606

Amount of Each Receipt this Period

2320.00

Receipt

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

2320.00

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

2320.00

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

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

FOR LINE NUMBER: PAGE 10 / 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Key Bank

Mailing Address Key Bank

City

Buffalo

State

NY

Zip Code

14202-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Election Cycle-to-Date ▼

710.23

Date of Receipt

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

Transaction ID: 10414.C33603

Amount of Each Receipt this Period

191.58

Interest Received

**B.**

Full Name (Last, First, Middle Initial)

Key Bank

Mailing Address Key Bank

City

Buffalo

State

NY

Zip Code

14202-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Election Cycle-to-Date ▼

867.26

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 8 / 2 0 1 1

Transaction ID: 10414.C33604

Amount of Each Receipt this Period

157.03

Interest Received

**C.**

Full Name (Last, First, Middle Initial)

Key Bank

Mailing Address Key Bank

City

Buffalo

State

NY

Zip Code

14202-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Election Cycle-to-Date ▼

964.57

Date of Receipt

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

Transaction ID: 10414.C33605

Amount of Each Receipt this Period

97.31

Interest Received

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

445.92

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

445.92

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 205

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Amer. Council of Life Insurance PAC

Mailing Address JC Scott  
101 Constitution Ave NW

City Washington State DC Zip Code 20001-

Purpose of Disbursement  
room rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 10414.C33600IK  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

543.75

IN KIND: ROOM RENTAL

**B.**

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

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 10201.E6057  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

2596.67

SEE BELOW

**C.**

Full Name (Last, First, Middle Initial)  
Safeway Store

Mailing Address 27 Washington

City Washington State DC Zip Code 20001-

Purpose of Disbursement  
fundraising/catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 10201.E6069  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

202.37

**[MEMO ITEM]**  
MEMO: FUNDRAISING/CATERING

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

3140.42

**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)

PAGE 12 / 205

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Capital Grille

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

Purpose of Disbursement  
fundraising/catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10201.E6070

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.00

**[MEMO ITEM]**

MEMO: FUNDRAISING/CATERING

**B.**

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

Mailing Address 1001 North Fairfax St # 410

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
conference

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10201.E6071

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1044.00

**[MEMO ITEM]**

MEMO: CONFERENCE

**C.**

Full Name (Last, First, Middle Initial)  
Toscana Cafe

Mailing Address 601 2nd Street NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement  
fundraising/catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10201.E6072

Date of Disbursement

/   /

Amount of Each Disbursement this Period

607.70

**[MEMO ITEM]**

MEMO: FUNDRAISING/CATERING

**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)

PAGE 13 / 205

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270	<b>Transaction ID:</b> 10304.E6098 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>4279.29</div> <b>SEE BELOW</b>
<b>B.</b> Full Name (Last, First, Middle Initial) US Airways Mailing Address Rochester International Airport City Rochester State NY Zip Code 14624- Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10304.E6099 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>671.40</div> <b>[MEMO ITEM]</b> MEMO: TRAVEL
<b>C.</b> Full Name (Last, First, Middle Initial) Hilton Hotel Mailing Address 1335 Avenue of the Americas City New York State NY Zip Code 10019-6012 Purpose of Disbursement fundraising/travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10304.E6100 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>238.11</div> <b>[MEMO ITEM]</b> MEMO: FUNDRAISING/TRAVEL

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

4279.29

**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)

PAGE 14 / 205

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Holiday Inn	<b>Transaction ID:</b> 10304.E6101 <b>Date of Disbursement</b>
Mailing Address 300 Broadway	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 03 / 2011</div> </div>
City Albany State NY Zip Code 12207-2901	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement fundraising/travel Candidate Name <div>Category/Type</div>	<div>205.19</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: FUNDRAISING/TRAVEL
<b>B.</b> Full Name (Last, First, Middle Initial) Southwest Airlines	<b>Transaction ID:</b> 10304.E6102 <b>Date of Disbursement</b>
Mailing Address PO Box 36647-1CR	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 03 / 2011</div> </div>
City Dallas State TX Zip Code 75235-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement travel Candidate Name <div>Category/Type</div>	<div>377.40</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: TRAVEL
<b>C.</b> Full Name (Last, First, Middle Initial) Hilton Hotel	<b>Transaction ID:</b> 10304.E6103 <b>Date of Disbursement</b>
Mailing Address 1335 Avenue of the Americas	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 03 / 2011</div> </div>
City New York State NY Zip Code 10019-6012	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement travel Candidate Name <div>Category/Type</div>	<div>294.82</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: TRAVEL

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)  
Chris Lee for Congress**A.**

Full Name (Last, First, Middle Initial)

Jet Blue Airlines

Mailing Address PO Box 17435

City  
Salt Lake CityState  
UTZip Code  
84117-0435Purpose of Disbursement  
fundraising/travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 10304.E6104

Date of Disbursement

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

Amount of Each Disbursement this Period

329.40

**[MEMO ITEM]**

MEMO: FUNDRAISING/TRAVEL

**B.**

Full Name (Last, First, Middle Initial)

Jet Blue Airlines

Mailing Address PO Box 17435

City  
Salt Lake CityState  
UTZip Code  
84117-0435Purpose of Disbursement  
fundraisingtravel

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 10304.E6105

Date of Disbursement

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

Amount of Each Disbursement this Period

329.40

**[MEMO ITEM]**

MEMO: FUNDRAISINGTRAVEL

**C.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101-1270Purpose of Disbursement  
see below

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 10408.E6233

Date of Disbursement

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

Amount of Each Disbursement this Period

2312.63

SEE BELOW

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

2312.63

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)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T Media	<b>Transaction ID:</b> 10408.E6234
Mailing Address 4900 Lake Rd	Date of Disbursement
City Wichita Falls	<div> <div>MM / DD / YY</div> <div>03 / 22 / 2011</div> </div>
State TX	Amount of Each Disbursement this Period
Zip Code 76308-	<div>586.35</div>
Purpose of Disbursement telephone service	<div>Category/ Type</div>
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	<b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T Media	<b>Transaction ID:</b> 10408.E6235
Mailing Address 4900 Lake Rd	Date of Disbursement
City Wichita Falls	<div> <div>MM / DD / YY</div> <div>03 / 22 / 2011</div> </div>
State TX	Amount of Each Disbursement this Period
Zip Code 76308-	<div>472.94</div>
Purpose of Disbursement telephone service	<div>Category/ Type</div>
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	<b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE
<b>C.</b> Full Name (Last, First, Middle Initial) Aristotle Publishing	<b>Transaction ID:</b> 10408.E6236
Mailing Address 205 Pennsylvania Ave SE	Date of Disbursement
City Washington	<div> <div>MM / DD / YY</div> <div>03 / 22 / 2011</div> </div>
State DC	Amount of Each Disbursement this Period
Zip Code 20003-1182	<div>1200.00</div>
Purpose of Disbursement computer support	<div>Category/ Type</div>
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	<b>[MEMO ITEM]</b> MEMO: COMPUTER SUPPORT

**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)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10201.E6067 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement reimbursement/fundraising	<div>138.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>REIMBURSEMENT/FUNDRAISING</b>	
<b>B.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10201.E6060 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement reimbursement/fundraising	<div>32.75</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>REIMBURSEMENT/FUNDRAISING</b>	
<b>C.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10414.E7289 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll	<div>1956.11</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>PAYROLL</b>	

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

**2126.86**

**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)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10201.E6059 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 0 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement reimbursement/ornaments Candidate Name	<div> <div>232.31</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>REIMBURSEMENT/ORNAMENTS</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10414.E7290 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div> <div>2066.94</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10414.E7291 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div> <div>2011.52</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>

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

**4310.77**

**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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10228.E6092 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement reimbursement/fundraising Candidate Name	<div> <div>30.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>REIMBURSEMENT/FUNDRAISING</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10414.E7292 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div> <div>2011.52</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Pamela Baker	<b>Transaction ID:</b> 10414.E7293 <b>Date of Disbursement</b>
Mailing Address 500 Allens Creek Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3406	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div> <div>2011.52</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>

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

**4053.04**

**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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Pamela Baker

Mailing Address 500 Allens Creek Rd

City Rochester State NY Zip Code 14618-3406

Purpose of Disbursement  
refund/fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10408.E6337

Date of Disbursement

/   /

Amount of Each Disbursement this Period

47.04

REFUND/FUNDRAISING

**B.**

Full Name (Last, First, Middle Initial)  
Pamela Baker

Mailing Address 500 Allens Creek Rd

City Rochester State NY Zip Code 14618-3406

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10414.E7294

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1007.10

PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Christine Burke

Mailing Address PO Box 16605

City Rochester State NY Zip Code 14616-

Purpose of Disbursement  
reimbursement/fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10201.E6063

Date of Disbursement

/   /

Amount of Each Disbursement this Period

61.51

REIMBURSEMENT/FUNDRAISING

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

1115.65

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Christine Burke Mailing Address PO Box 16605	<b>Transaction ID:</b> 10201.E6061 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14616- Purpose of Disbursement reimbursement/travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>41.00</div> <b>REIMBURSEMENT/TRAVEL</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Christine Burke Mailing Address PO Box 16605 City Rochester State NY Zip Code 14616- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7283 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>561.94</div> <b>PAYROLL</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Christine Burke Mailing Address PO Box 16605 City Rochester State NY Zip Code 14616- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7284 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>591.94</div> <b>PAYROLL</b>

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

**1194.88**

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Christine Burke	<b>Transaction ID:</b> 10414.E7285 <b>Date of Disbursement</b>
Mailing Address PO Box 16605	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>0 2 / 1 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14616-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div> <div>576.94</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>PAYROLL</b>	
<b>B.</b> Full Name (Last, First, Middle Initial) Christine Burke	<b>Transaction ID:</b> 10414.E7286 <b>Date of Disbursement</b>
Mailing Address PO Box 16605	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>0 2 / 2 8 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14616-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div> <div>576.94</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>PAYROLL</b>	
<b>C.</b> Full Name (Last, First, Middle Initial) Christine Burke	<b>Transaction ID:</b> 10408.E6107 <b>Date of Disbursement</b>
Mailing Address PO Box 16605	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14616-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement reimbursement/flowers Candidate Name	<div> <div>61.50</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>REIMBURSEMENT/FLOWERS</b>	

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

**1215.38**

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Christine Burke Mailing Address PO Box 16605	<b>Transaction ID:</b> 10414.E7287 <b>Date of Disbursement</b> <div> <div>03</div> <div>15</div> <div>2011</div> </div>
City Rochester State NY Zip Code 14616- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>576.94</div> PAYROLL
<b>B.</b> Full Name (Last, First, Middle Initial) Christine Burke Mailing Address PO Box 16605 City Rochester State NY Zip Code 14616- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7288 <b>Date of Disbursement</b> <div> <div>03</div> <div>30</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>604.73</div> PAYROLL
<b>C.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st St SE City Washington State DC Zip Code 20003-1801 Purpose of Disbursement fundraising/catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10201.E6054 <b>Date of Disbursement</b> <div> <div>01</div> <div>26</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>405.30</div> FUNDRAISING/CATERING

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

**1586.97**

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st St SE	<b>Transaction ID:</b> 10304.E6095 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Washington State DC Zip Code 20003-1801 Purpose of Disbursement fundraising/catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>422.07</div> <b>FUNDRAISING/CATERING</b>
<b>B.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190 City Perry State NY Zip Code 14530-0190 Purpose of Disbursement office expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7296 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>70.02</div> <b>OFFICE EXPENSES</b>
<b>C.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190 City Perry State NY Zip Code 14530-0190 Purpose of Disbursement impound tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7295 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1545.17</div> <b>IMPOUND TAX</b>

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

**2037.26**

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190	<b>Transaction ID:</b> 10414.E7297 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 1 1</div> </div>
City Perry State NY Zip Code 14530-0190 Purpose of Disbursement tax impound Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1332.32</div> <b>TAX IMPOUND</b>
<b>B.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190 City Perry State NY Zip Code 14530-0190 Purpose of Disbursement office expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7298 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>114.92</div> <b>OFFICE EXPENSES</b>
<b>C.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190 City Perry State NY Zip Code 14530-0190 Purpose of Disbursement office expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7301 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>57.07</div> <b>OFFICE EXPENSES</b>

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

**1504.31**

**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:  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190	<b>Transaction ID:</b> 10414.E7299 <b>Date of Disbursement</b> <div> <div>02</div> <div>14</div> <div>2011</div> </div>
City Perry State NY Zip Code 14530-0190 Purpose of Disbursement tax impound Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1417.92</div> <b>TAX IMPOUND</b>
<b>B.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190 City Perry State NY Zip Code 14530-0190 Purpose of Disbursement tax impound Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7304 <b>Date of Disbursement</b> <div> <div>02</div> <div>28</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1329.32</div> <b>TAX IMPOUND</b>
<b>C.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190 City Perry State NY Zip Code 14530-0190 Purpose of Disbursement office expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7303 <b>Date of Disbursement</b> <div> <div>02</div> <div>28</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>57.07</div> <b>OFFICE EXPENSES</b>

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

**2804.31**

**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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190	<b>Transaction ID:</b> 10414.E7306 <b>Date of Disbursement</b> <div> <div>03</div> <div>15</div> <div>2011</div> </div>
City Perry State NY Zip Code 14530-0190 Purpose of Disbursement tax impound Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1370.56</div> <b>TAX IMPOUND</b>
<b>B.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190 City Perry State NY Zip Code 14530-0190 Purpose of Disbursement payroll expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7305 <b>Date of Disbursement</b> <div> <div>03</div> <div>15</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>62.82</div> <b>PAYROLL EXPENSES</b>
<b>C.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190 City Perry State NY Zip Code 14530-0190 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7308 <b>Date of Disbursement</b> <div> <div>03</div> <div>30</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>57.07</div>

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

**1490.45**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) CPP Mailing Address PO Box 190	<b>Transaction ID:</b> 10414.E7307 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City State Zip Code Perry NY 14530-0190 Purpose of Disbursement tax impound Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>961.75</div> <b>TAX IMPOUND</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Charlie Dent Mailing Address 1009 Longworth HOB City State Zip Code Washington DC 20515- Purpose of Disbursement Tuesday Group event Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> 10201.E6073 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 8 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>225.00</div> <b>TUESDAY GROUP EVENT</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Internal Revenue Service City State Zip Code Andover MA 05501-0001 Purpose of Disbursement tax due Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> 10408.E6237 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>461.00</div> <b>TAX DUE</b>

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

**1647.75**

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

X	17		18		19a		19b
	20a		20b		20c		21

NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

FEC Schedule B ( Form 3 ) (Revised 02/2009)

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Key Bank

**Transaction ID:** 10617.E7343

Date of Disbursement

/   /

Mailing Address Key Bank

City Buffalo State NY Zip Code 14202-

Amount of Each Disbursement this Period

Purpose of Disbursement  
debt adjustment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

DEBT ADJUSTMENT

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Key Bank

**Transaction ID:** 10617.E7344

Date of Disbursement

/   /

Mailing Address Key Bank

City Buffalo State NY Zip Code 14202-

Amount of Each Disbursement this Period

Purpose of Disbursement  
service charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

SERVICE CHARGE

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
Christopher Lee

**Transaction ID:** 10228.E6078

Date of Disbursement

/   /

Mailing Address 48 Bradenham Place

City Buffalo State NY Zip Code 14226-

Amount of Each Disbursement this Period

Purpose of Disbursement  
reimbursement/meetings

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

REIMBURSEMENT/MEETINGS

State: District:

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

**3463.92**

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Masi Enterprises, Inc.	<b>Transaction ID:</b> 10201.E6066 <b>Date of Disbursement</b>
Mailing Address 1577 Ridge Road West- Suite 201	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14615-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement rent	<div>835.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>RENT</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Masi Enterprises, Inc.	<b>Transaction ID:</b> 10204.E6074 <b>Date of Disbursement</b>
Mailing Address 1577 Ridge Road West- Suite 201	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14615-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement rent	<div>835.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>RENT</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Masi Enterprises, Inc.	<b>Transaction ID:</b> 10304.E6093 <b>Date of Disbursement</b>
Mailing Address 1577 Ridge Road West- Suite 201	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14615-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement rent	<div>835.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>RENT</b>

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

**2505.00**

**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  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
New York State Insurance Fund

Mailing Address Workers Compensation  
PO Box 5262

City Binghamton State NY Zip Code 13902-

Purpose of Disbursement  
workers compensation insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10201.E6050

Date of Disbursement

/   /

Amount of Each Disbursement this Period

746.36

WORKERS COMPENSATION INSU-  
RANCE

**B.**

Full Name (Last, First, Middle Initial)  
New York State Insurance Fund

Mailing Address Workers Compensation  
PO Box 5262

City Binghamton State NY Zip Code 13902-

Purpose of Disbursement  
workmans comp insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10413.E7274

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1104.03

WORKMANS COMP INSURANCE

**C.**

Full Name (Last, First, Middle Initial)  
Bill Oorbeek

Mailing Address 5903 Woodfield Estates Dr

City Alexandria State VA Zip Code 22310-

Purpose of Disbursement  
reimbursement/fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10201.E6058

Date of Disbursement

/   /

Amount of Each Disbursement this Period

370.94

REIMBURSEMENT/FUNDRAISING

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

2221.33

**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  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bill Oorbeek	<b>Transaction ID:</b> 10201.E6051 <b>Date of Disbursement</b>
Mailing Address 5903 Woodfield Estates Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 1 1</div> </div>
City Alexandria State VA Zip Code 22310- Purpose of Disbursement reimbursement/fundraising Candidate Name	Amount of Each Disbursement this Period <div>178.41</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> REIMBURSEMENT/FUNDRAISING
<b>B.</b> Full Name (Last, First, Middle Initial) Bill Oorbeek	<b>Transaction ID:</b> 10228.E6079 <b>Date of Disbursement</b>
Mailing Address 5903 Woodfield Estates Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 1</div> </div>
City Alexandria State VA Zip Code 22310- Purpose of Disbursement reimbursement/funhdraising Candidate Name	Amount of Each Disbursement this Period <div>3230.55</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> REIMBURSEMENT/FUNHDRAISING
<b>C.</b> Full Name (Last, First, Middle Initial) Oorbeek Group	<b>Transaction ID:</b> 10201.E6064 <b>Date of Disbursement</b>
Mailing Address %MSwaniger Business Services 3140 W Ward Rd - Ste 201	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 1 1</div> </div>
City Dunkirk State MD Zip Code 20754- Purpose of Disbursement generic fundraising consultant Candidate Name	Amount of Each Disbursement this Period <div>4600.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> GENERIC FUNDRAINING CONSUL- LTANT

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

**8008.96**

**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  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Oorbeek Group	<b>Transaction ID:</b> 10204.E6075 <b>Date of Disbursement</b>
Mailing Address %MSwaniger Business Services 3140 W Ward Rd - Ste 201	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 4 / 2 0 1 1</div> </div>
City Dunkirk State MD Zip Code 20754-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement generic fundraising consultant Candidate Name	<div> <div>4600.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>Category/Type</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>GENERIC FUNDRAISING CONSULTANT</b>	
<b>B.</b> Full Name (Last, First, Middle Initial) Oorbeek Group	<b>Transaction ID:</b> 10304.E6094 <b>Date of Disbursement</b>
Mailing Address %MSwaniger Business Services 3140 W Ward Rd - Ste 201	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Dunkirk State MD Zip Code 20754-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement generic fundraising consultant Ma Candidate Name	<div> <div>13800.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>Category/Type</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>GENERIC FUNDRAISING CONSULTANT MA</b>	
<b>C.</b> Full Name (Last, First, Middle Initial) Scooter Store PAC	<b>Transaction ID:</b> 10414.C33601IK <b>Date of Disbursement</b>
Mailing Address Mark Leita 1650 Independence Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 1</div> </div>
City New Braunfels State TX Zip Code 78132-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising expenses Candidate Name	<div> <div>750.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>Category/Type</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>IN KIND: FUNDRAISING EXPENSES</b>	

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

**19150.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Time Warner Cable	<b>Transaction ID:</b> 10201.E6062 <b>Date of Disbursement</b>
Mailing Address PO Box 994	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14270-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement phone service Candidate Name <div>Category/Type</div>	<div>267.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>PHONE SERVICE</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Time Warner Cable	<b>Transaction ID:</b> 10304.E6097 <b>Date of Disbursement</b>
Mailing Address PO Box 994	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14270-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement phone service Candidate Name <div>Category/Type</div>	<div>268.36</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>PHONE SERVICE</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Time Warner Cable	<b>Transaction ID:</b> 10408.E6232 <b>Date of Disbursement</b>
Mailing Address PO Box 994	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 2 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14270-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement phone service Candidate Name <div>Category/Type</div>	<div>268.36</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>PHONE SERVICE</b>

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

**803.72**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Tom Wolf Imaging Mailing Address 388 N Forest Rd	<b>Transaction ID:</b> 10201.E6065 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-5035 Purpose of Disbursement photography Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1408.31</div> <b>PHOTOGRAPHY</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Tom Wolf Imaging Mailing Address 388 N Forest Rd City Buffalo State NY Zip Code 14221-5035 Purpose of Disbursement photography Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10304.E6096 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>304.50</div> <b>PHOTOGRAPHY</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Cory Tylanda Mailing Address 4953 S Main St City North Rose State NY Zip Code 14516- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10414.E7277 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>392.25</div> <b>PAYROLL</b>

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

**2105.06**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Cory Tylenda	<b>Transaction ID:</b> 10414.E7278 Date of Disbursement
	Mailing Address 4953 S Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 1 1</div> </div>
	City North Rose State NY Zip Code 14516-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<div> <div></div> <div>292.42</div> </div>
	Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	PAYROLL
	State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) Cory Tylenda	<b>Transaction ID:</b> 10414.E7279 Date of Disbursement
	Mailing Address 4953 S Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 4 / 2 0 1 1</div> </div>
	City North Rose State NY Zip Code 14516-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<div> <div></div> <div>322.60</div> </div>
	Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	PAYROLL
	State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) Cory Tylenda	<b>Transaction ID:</b> 10414.E7280 Date of Disbursement
	Mailing Address 4953 S Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 1 1</div> </div>
	City North Rose State NY Zip Code 14516-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<div> <div></div> <div>218.99</div> </div>
	Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	PAYROLL
	State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**834.01**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Cory Tylenda	<b>Transaction ID:</b> 10408.E6109 <b>Date of Disbursement</b>
Mailing Address 4953 S Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City North Rose State NY Zip Code 14516-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement reimbursement/office supplies Candidate Name	<div> <div>11.28</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>REIMBURSEMENT/OFFICE SUPPLIES</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Cory Tylenda	<b>Transaction ID:</b> 10414.E7281 <b>Date of Disbursement</b>
Mailing Address 4953 S Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 1 1</div> </div>
City North Rose State NY Zip Code 14516-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div> <div>319.46</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Cory Tylenda	<b>Transaction ID:</b> 10414.E7282 <b>Date of Disbursement</b>
Mailing Address 4953 S Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City North Rose State NY Zip Code 14516-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div> <div>460.57</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>

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

**791.31**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Joan Upton	<b>Transaction ID:</b> 10124.E6030 <b>Date of Disbursement</b>
Mailing Address 7 Kalleston Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 1 1</div> </div>
City Pittsford State NY Zip Code 14534-2919	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement printing Candidate Name	<div> <div>465.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>PRINTING</b>	
<b>B.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> 10201.E6056 <b>Date of Disbursement</b>
Mailing Address 1857 Dewey Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14615-2903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement postage Candidate Name	<div> <div>7.85</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>POSTAGE</b>	
<b>C.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> 10208.E6076 <b>Date of Disbursement</b>
Mailing Address 1857 Dewey Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14615-2903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement postage Candidate Name	<div> <div>660.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>POSTAGE</b>	

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

**1132.85**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
US Postmaster

Mailing Address 1857 Dewey Ave

City State Zip Code  
Rochester NY 14615-2903

Purpose of Disbursement  
postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10408.E6110

Date of Disbursement

/   /

Amount of Each Disbursement this Period

88.00

POSTAGE

**B.**

Full Name (Last, First, Middle Initial)  
Zenger Group

Mailing Address Jenny Kaeselau  
PO Box 647

City State Zip Code  
Buffalo NY 14207-

Purpose of Disbursement  
postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10201.E6053

Date of Disbursement

/   /

Amount of Each Disbursement this Period

654.78

POSTAGE

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

742.78

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

76909.99



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

A.

Full Name (Last, First, Middle Initial)

Christopher Lee

Mailing Address 48 Bradenham Place

City  
Buffalo

State  
NY

Zip Code  
14226-

Purpose of Disbursement

Repay Loan Made/Guar. by Cand repayment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼

Primary 2012

Transaction ID: 10408.E6106

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100000.00

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

100000.00

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

100000.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Jack Alexander

Mailing Address 5999 South Park Ave # 157

City Hamburg State NY Zip Code 14075-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10408.E6243

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Roger & Debra Almeter

Mailing Address 2690 North Sheldon Rd

City Strykersville State NY Zip Code 14145-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10408.E6246

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

225.00

**C.**

Full Name (Last, First, Middle Initial)  
Carol Anderson

Mailing Address 1025 Strong Rd

City Victor State NY Zip Code 14564-9124

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

**Transaction ID:** 10413.E7015

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

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

1475.00

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

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X	20a		20b		20c		21

NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

FEC Schedule B ( Form 3 ) (Revised 02/2009)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Donald Arthur Mailing Address 47 Davinci Ct	<b>Transaction ID:</b> 10408.E6259 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Ash Mailing Address 2626 River Rd	<b>Transaction ID:</b> 10408.E6250 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Piffard State NY Zip Code 14533-9759 Purpose of Disbursement Refund of Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>750.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Stephen Ashley Mailing Address 4348 County Road 37	<b>Transaction ID:</b> 10408.E6253 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Livonia State NY Zip Code 14487-9414 Purpose of Disbursement Refund of Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

1750.00

**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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Fred Attea Mailing Address 5490 Via Marina	<b>Transaction ID:</b> 10413.E7019 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Williamsville State NY Zip Code 14221-2839 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Craig Avery Mailing Address 699 Mountain View Dr City Lewiston State NY Zip Code 14092- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7020 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Bruce Baird Mailing Address 85 Meadow Rd City Buffalo State NY Zip Code 14216-3613 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7022 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

3000.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Susan OConnor Baird Mailing Address 85 Meadow Rd	<b>Transaction ID:</b> 10413.E7021 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14216- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Bruce Baker Mailing Address 500 Allens Creek Rd City Rochester State NY Zip Code 14618-3406 Purpose of Disbursement Refund of Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6275 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Baker-Levin Mailing Address 32 Vassar Dr City Getzville State NY Zip Code 14068- Purpose of Disbursement Refund of Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6277 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

1750.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Carl Teo Balbach

Mailing Address 149 Windsor Ave

City Buffalo State NY Zip Code 14209-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7023

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

William Balderston

Mailing Address 28 Whitestone Ln

City Rochester State NY Zip Code 14618-4126

Purpose of Disbursement  
Refund of Contribution Refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6282

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Gary Ball

Mailing Address 22 South Rd

City Key Largo State FL Zip Code 33037-

Purpose of Disbursement  
Refund of Contribution Refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6285

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

500.00

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

1750.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Bradford Banks

Mailing Address 5170 Strickler Rd

City State Zip Code  
Clarence NY 14031-1545

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7024

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Ravi Bansal

Mailing Address 9707 The Pines

City State Zip Code  
Clarence NY 14031-1559

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: 10408.E6262

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Charles Banta

Mailing Address 180 Middlesex Rd

City State Zip Code  
Buffalo NY 14216-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7026

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

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

3900.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Charles U. Banta

Mailing Address 735 Renaissance Dr - Apt K312

City Buffalo State NY Zip Code 14221-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 10408.E6263  
Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Jane Banta

Mailing Address 180 Middlesex Road

City Buffalo State NY Zip Code 14216-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7025  
Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph Basil

Mailing Address 600 Klein Rd

City Buffalo State NY Zip Code 14221-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 10408.E6273  
Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

500.00

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

2000.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Surinder Bath Mailing Address 14 Locust Dr	<b>Transaction ID:</b> 10228.E6085 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 1</div> </div>
City Middleport State NY Zip Code 14105- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Surinder Bath Mailing Address 14 Locust Dr City Middleport State NY Zip Code 14105- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10408.E6276 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Paul Bauer Mailing Address 60 Waterfront Circle City Buffalo State NY Zip Code 14202- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10408.E6289 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>400.00</div> <div>010</div> Category/ Type

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

**1150.00**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Anthony Baynes	<b>Transaction ID:</b> 10413.E7027 <b>Date of Disbursement</b>
Mailing Address 199 Viscount Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-1771	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1000.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Jeremy Biggs Beck	<b>Transaction ID:</b> 10408.E6281 <b>Date of Disbursement</b>
Mailing Address 287 Brantwoo Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14226-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>250.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Judy Beecher	<b>Transaction ID:</b> 10413.E7028 <b>Date of Disbursement</b>
Mailing Address 28 Oakland PI	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14222-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1000.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

2250.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Beecher	<b>Transaction ID:</b> 10413.E7029 <b>Date of Disbursement</b>
Mailing Address 28 Oakland Pl	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14222-2009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>3800.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Belair	<b>Transaction ID:</b> 10413.E7067 <b>Date of Disbursement</b>
Mailing Address 2001 Pennsylvania Ave NW - Ste 250	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Washington State DC Zip Code 20006-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph M. Bell	<b>Transaction ID:</b> 10413.E7068 <b>Date of Disbursement</b>
Mailing Address 4865 W Lake Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Canandaigua State NY Zip Code 14424-8984	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>2400.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**7200.00**

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

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for each category of the  
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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

A.

Full Name (Last, First, Middle Initial)

Mary Bell

Mailing Address 4865 W Lake Rd

City State Zip Code  
 Canandaigua NY 14424-8984

Purpose of Disbursement  
 Refund of Contribution refund

Candidate Name

010  
 Category/  
 Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7069

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

B.

Full Name (Last, First, Middle Initial)

Richard Bell

Mailing Address

City State Zip Code

Purpose of Disbursement  
 Refund of Contribution refund

Candidate Name

010  
 Category/  
 Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: 10408.E6286

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mike Benard

Mailing Address 7785 Modock Rd

City State Zip Code  
 Victor NY 14564-9113

Purpose of Disbursement  
 Refund of Contribution refund

Candidate Name

010  
 Category/  
 Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: 10408.E6287

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

500.00

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

3400.00

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:  
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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Benedict	<b>Transaction ID:</b> 10413.E7070 <b>Date of Disbursement</b>
Mailing Address 83-03 Beverly Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Kew Gardens State NY Zip Code 11415-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div>010 Category/ Type</div>	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) John Benoit	<b>Transaction ID:</b> 10408.E6339 <b>Date of Disbursement</b>
Mailing Address 4226 Lake Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Lockport State NY Zip Code 14094-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div>010 Category/ Type</div>	<div>250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Martin Berardi	<b>Transaction ID:</b> 10408.E6341 <b>Date of Disbursement</b>
Mailing Address 61 Terrace Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Elma State NY Zip Code 14059-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div>010 Category/ Type</div>	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

1750.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Berkovitch

Mailing Address 131-15 Merrick Blvd

City State Zip Code  
Jamaica NY 11434-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6343

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 04 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Stanley Bernstein

Mailing Address 300 Trenor Dr

City State Zip Code  
Wykagyl NY 10804-3814

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6344

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 04 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Randall Best

Mailing Address 103 Sunset Blvd

City State Zip Code  
Angola NY 14006-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7071

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

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

3400.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Scott Bieler	<b>Transaction ID:</b> 10413.E7072 <b>Date of Disbursement</b>
Mailing Address 360 W Falls Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City West Falls State NY Zip Code 14170-9718	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1000.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Bigos	<b>Transaction ID:</b> 10408.E6350 <b>Date of Disbursement</b>
Mailing Address 5653 Kippen Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City East Amherst State NY Zip Code 14051-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>250.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Stephen Bills	<b>Transaction ID:</b> 10408.E6353 <b>Date of Disbursement</b>
Mailing Address 8078 Dryer Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Victor State NY Zip Code 14564-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>500.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

1750.00

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



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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

A.

Full Name (Last, First, Middle Initial)  
Bernard Birnbaum

Mailing Address 184 Inwood Drive

City Rochester State NY Zip Code 14625-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7073

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)  
Jay Birnbaum

Mailing Address 57 Knollwood Dr

City Rochester State NY Zip Code 14618-3512

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7074

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
Eugene Blabey

Mailing Address PO Box 92

City Forestburgh State NY Zip Code 12777-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7075

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Bleiberg	<b>Transaction ID:</b> 10408.E6359 <b>Date of Disbursement</b>
Mailing Address 2401 Calvert St NW #321	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
<div> <div>City Washington State DC Zip Code 20008-</div> <div> <div>Purpose of Disbursement</div> <div>Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010</div> <div>Category/Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>200.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	
<b>B.</b> Full Name (Last, First, Middle Initial) Drew Blum	<b>Transaction ID:</b> 10617.E7340 <b>Date of Disbursement</b>
Mailing Address 7267 Hayes Hollow Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
<div> <div>City West Falls State NY Zip Code 14170-</div> <div> <div>Purpose of Disbursement</div> <div>Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010</div> <div>Category/Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	
<b>C.</b> Full Name (Last, First, Middle Initial) Frederic Bogart	<b>Transaction ID:</b> 10408.E6363 <b>Date of Disbursement</b>
Mailing Address 770 Taylars Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
<div> <div>City Mamaroneck State NY Zip Code 10543-</div> <div> <div>Purpose of Disbursement</div> <div>Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010</div> <div>Category/Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>500.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	

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

**1700.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Anntheresa Boller	<b>Transaction ID:</b> 10408.E6364 <b>Date of Disbursement</b>
Mailing Address 440 Winspear Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Elma State NY Zip Code 14059-9110	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Boylan, Brown, Code, Fowler, Vigdor	<b>Transaction ID:</b> 10413.E7258 <b>Date of Disbursement</b>
Mailing Address Mr. Michael Howard 2400 Chase Square	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14604-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>1300.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Larry Brady	<b>Transaction ID:</b> 10413.E7077 <b>Date of Disbursement</b>
Mailing Address 24 Dockside Lane #5	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Key Largo State FL Zip Code 33037-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type

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

2550.00

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

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

Use separate schedule(s)  
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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
S. Richard Brand

Mailing Address 19 Sail Point Ln

City State Zip Code  
Key Largo FL 33037-3769

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6367

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Kelly Brannen

Mailing Address 20 Turnberry Ct

City State Zip Code  
Buffalo NY 14221-8206

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7078

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Brinkman

Mailing Address 1000 Rock Beach Rd

City State Zip Code  
Rochester NY 14617-1327

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7079

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

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

2200.00

**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:  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Samuel Bronsky	<b>Transaction ID:</b> 10408.E6372 <b>Date of Disbursement</b>
Mailing Address 150 Crestwood Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Williamsville State NY Zip Code 14221-1463	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>310.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Philip Brooks	<b>Transaction ID:</b> 10408.E6375 <b>Date of Disbursement</b>
Mailing Address 2025 Paine Road PO Box 873	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Nunda State NY Zip Code 14517-0873	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>350.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Laura Brosnahan	<b>Transaction ID:</b> 10408.E6376 <b>Date of Disbursement</b>
Mailing Address 173 Hampton Hill Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>250.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**910.00**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Gary Brost

Mailing Address 200 Delaware Ave Unit 1509

City Buffalo State NY Zip Code 14202-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7080

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph Bucci

Mailing Address PO Box 98

City Geneseo State NY Zip Code 14454-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10228.E6091

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Gerald Buchheit

Mailing Address 6210 Old Lake Shore Rd

City Lake View State NY Zip Code 14085-9548

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7081

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

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

3900.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ryan Burke <hr/> Mailing Address 285 Lincoln Pkwy <hr/> City Buffalo State NY Zip Code 14216- <hr/> Purpose of Disbursement Refund of Contribution refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6380 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	4	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3	/	0	4	/	2	0	1	1												
<hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">500.00</div> <hr/> <div style="border: 1px solid black; padding: 5px;"> 010  Category/  Type </div>																					
<b>B.</b> Full Name (Last, First, Middle Initial) Ann Burr <hr/> Mailing Address 16 Mitchell Rd <hr/> City Pittsford State NY Zip Code 14534-2302 <hr/> Purpose of Disbursement Refund of Contribution refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7082 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	1	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3	/	0	1	/	2	0	1	1												
<hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">1000.00</div> <hr/> <div style="border: 1px solid black; padding: 5px;"> 010  Category/  Type </div>																					
<b>C.</b> Full Name (Last, First, Middle Initial) Bruce Buyers <hr/> Mailing Address 4931 Sheridan Dr <hr/> City Williamsville State NY Zip Code 14221-4549 <hr/> Purpose of Disbursement Refund of Contribution refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6385 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	4	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3	/	0	4	/	2	0	1	1												
<hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">500.00</div> <hr/> <div style="border: 1px solid black; padding: 5px;"> 010  Category/  Type </div>																					

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

**2000.00**

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
James Buzzard

Mailing Address 99 Rolling Meadow Ln

City East Amherst State NY Zip Code 14051-1807

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6386

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

535.00

**B.**Full Name (Last, First, Middle Initial)  
Harlan Calkins

Mailing Address 105 Country Club Dr

City Rochester State NY Zip Code 14618-3721

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7083

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 116 Colby St

City Spencerport State NY Zip Code 14559-9711

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6393

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

200.00

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

1735.00

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)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Hazard Campbell	<b>Transaction ID:</b> 10408.E6395
	Mailing Address 751 West Ferry St - PH-East	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14222-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>200.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) Paul Cannon	<b>Transaction ID:</b> 10413.E7084
	Mailing Address 905 River Rd	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Youngstown State NY Zip Code 14174-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>1000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Capriotto	<b>Transaction ID:</b> 10413.E7085
	Mailing Address Bauer Service 4298 South Buffalo St	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Orchard Park State NY Zip Code 14127-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>1000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	

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

**2200.00**

**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)

PAGE 66 / 205

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Charles Caranci</p> <p>Mailing Address 444 Stone Rd</p> <p>City Pittsford State NY Zip Code 14534-</p> <p>Purpose of Disbursement Refund of Contribution refund</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10408.E6397</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/ Type</p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) Christopher Cardillo</p> <p>Mailing Address 9004 Stonebriar Dr</p> <p>City Clarence Center State NY Zip Code 14032-9375</p> <p>Purpose of Disbursement Refund of Contribution Refund</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10408.E6293</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/ Type</p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) Thomas Casarsa</p> <p>Mailing Address 679 Busti Ave</p> <p>City Buffalo State NY Zip Code 14213-2404</p> <p>Purpose of Disbursement Refund of Contribution refund</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10408.E6403</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 225.00</p> <p>010 Category/ Type</p>

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

1225.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Castiglia

Mailing Address 1749 Reading Rd

City State Zip Code  
West Falls NY 14170-9760

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
State: District: Primary 2012

Transaction ID: 10413.E7086  
Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Kirsten Chadwick

Mailing Address Fierce Isakowitz Blalock  
1155 F Street NW - Ste 950

City State Zip Code  
Washington DC 20004-1336

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
State: District: Primary 2012

Transaction ID: 10408.E6406  
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Gregory Chambery

Mailing Address 7 Sweets View Ln

City State Zip Code  
Fairport NY 14450-8423

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
State: District: Primary 2012

Transaction ID: 10408.E6411  
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

500.00

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

2000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 68 / 205

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
Anna Chen

Mailing Address 70 Lanoche Ct

City Buffalo State NY Zip Code 14221-1977

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
State: District: Primary 2012Transaction ID: 10408.E6413  
Date of DisbursementM M / D D / Y Y Y Y  
0 3 / 0 4 / 2 0 1 1

Amount of Each Disbursement this Period

250.00

**B.**Full Name (Last, First, Middle Initial)  
Raja Cheruvu

Mailing Address 165 Via Foresta Ln

City Buffalo State NY Zip Code 14221-1984

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
State: District: Primary 2012Transaction ID: 10408.E6415  
Date of DisbursementM M / D D / Y Y Y Y  
0 3 / 0 4 / 2 0 1 1

Amount of Each Disbursement this Period

300.00

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

Mailing Address 57 Brice Landing Ct

City East Amherst State NY Zip Code 14051-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
State: District: Primary 2012Transaction ID: 10408.E6419  
Date of DisbursementM M / D D / Y Y Y Y  
0 3 / 0 4 / 2 0 1 1

Amount of Each Disbursement this Period

250.00

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

800.00

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)

PAGE 69 / 205

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) William Christ	<b>Transaction ID:</b> 10408.E6421 <b>Date of Disbursement</b>
Mailing Address 103 Wood Acres Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City East Amherst State NY Zip Code 14051-1713	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div>250.00</div>
Candidate Name	<div>010</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Dennis Christiano	<b>Transaction ID:</b> 10408.E6422 <b>Date of Disbursement</b>
Mailing Address Westgate Nursing Home 525 Beahan Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14624-3403	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div>500.00</div>
Candidate Name	<div>010</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Chur	<b>Transaction ID:</b> 10413.E7087 <b>Date of Disbursement</b>
Mailing Address 4988 Spaulding Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-1572	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div>2400.00</div>
Candidate Name	<div>010</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

3150.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Cynthia Ciminelli

Mailing Address 725 Lafayette Ave

City	State	Zip Code
Buffalo	NY	14222-1449

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State:	Primary 2012
District:	

Transaction ID: 10413.E7089

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00
---------

**B.**

Full Name (Last, First, Middle Initial)

Frank Ciminelli

Mailing Address Centerpointe Corporate Park  
350 Essjay Rd - Ste 101

City	State	Zip Code
Buffalo	NY	14221-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State:	Primary 2012
District:	

Transaction ID: 10413.E7088

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00
---------

**C.**

Full Name (Last, First, Middle Initial)

Anthony Cipolla

Mailing Address 5121 Oak Hill St

City	State	Zip Code
Lewiston	NY	14092-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State:	Primary 2012
District:	

Transaction ID: 10413.E7090

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00
---------

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

4000.00

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)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Jo Frances Cipolla</p> <p>Mailing Address 6291 Walnut Creek Dr</p> <p>City East Amherst State NY Zip Code 14051-</p> <p>Purpose of Disbursement Refund of Contribution refund</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10408.E6426</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>010 Category/ Type</p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) Stephen Clark</p> <p>Mailing Address 9273 Lerwick Dr</p> <p>City Dublin State OH Zip Code 43017-</p> <p>Purpose of Disbursement Refund of Contribution refund</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10408.E6432</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/ Type</p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) Brian Clayback</p> <p>Mailing Address 29 Falconcrest Lane</p> <p>City Orchard Park State NY Zip Code 14127-</p> <p>Purpose of Disbursement Refund of Contribution refund</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10408.E6433</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/ Type</p>

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

1050.00

**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)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Donald Clayback Mailing Address 161 Huxley Dr	<b>Transaction ID:</b> 10408.E6434 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14226- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Adam Cohen Mailing Address 61 Fair Oaks Court City Newtown State PA Zip Code 18940- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7091 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Lawrence Cohn Mailing Address Baron Capital 767 5th Ave City New York State NY Zip Code 10153- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7092 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

2250.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Emilio Colaiacovo

Mailing Address 190 Kinsey Ave

City Buffalo State NY Zip Code 14217-1949

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

**Transaction ID:** 10413.E7093

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Randy Coleman

Mailing Address 66 South Vernon Street

City Middleport State NY Zip Code 14105-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

**Transaction ID:** 10408.E6436

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
William Coleman

Mailing Address 31 Halfway Rd

City Key Largo State FL Zip Code 33037-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

**Transaction ID:** 10408.E6439

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

200.00

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

1450.00

**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  
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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Anthony Colucci Mailing Address 154 Rumsey Rd	<b>Transaction ID:</b> 10408.E6443 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14209-1041 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>785.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Andre Cook Mailing Address 5525 Thompson Rd City Clarence State NY Zip Code 14031-1126 Purpose of Disbursement Refund of Contribution REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7099 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Frederic Cook Mailing Address 6415 Woodberry Ct City East Amherst State NY Zip Code 14051-1547 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7094 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

**2785.00**

**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)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Fred Coon

Mailing Address 741 Winspear Rd

City State Zip Code  
Elma NY 14059-9436

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6446

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

325.00

**B.**

Full Name (Last, First, Middle Initial)  
Philip Corwin

Mailing Address 5151 Rockledge Dr

City State Zip Code  
Clarence NY 14031-2441

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7098

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Charles Cottrell

Mailing Address 114 Brooks Blvd

City State Zip Code  
Brewton AL 36426-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6447

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

250.00

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

1575.00

**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)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
J.D. Crane

Mailing Address PO Box 589

City Buffalo State NY Zip Code 14226-0589

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7096

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Charlie Cummings

Mailing Address 1659 Attridge Rd

City Churchville State NY Zip Code 14428-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6454

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Janice Cummings

Mailing Address 204 Clarendon Rd # 168

City Albion State NY Zip Code 14411-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6455

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

300.00

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

3200.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Patrick Cunningham	<b>Transaction ID:</b> 10413.E7097 <b>Date of Disbursement</b>																				
Mailing Address 18 Parkview Manor Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	1												
City Honeoye Falls State NY Zip Code 14472-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution REFUND	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>010</td> </tr> </table> Category/ Type	010																			
010																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012																					
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Czarnecki	<b>Transaction ID:</b> 10408.E6457 <b>Date of Disbursement</b>																				
Mailing Address 5019 Rockhaven Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	1	1												
City East Amherst State NY Zip Code 14031-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution refund	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
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Candidate Name	<table border="1"> <tr> <td>010</td> </tr> </table> Category/ Type	010																			
010																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012																					
<b>C.</b> Full Name (Last, First, Middle Initial) David DArata	<b>Transaction ID:</b> 10413.E7100 <b>Date of Disbursement</b>																				
Mailing Address Dansa & DArata 361 Delaware Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	1												
City Buffalo State NY Zip Code 14202-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution REFUND	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>010</td> </tr> </table> Category/ Type	010																			
010																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012																					

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

2500.00

**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

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(check only one)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Walid Daham Mailing Address 97 Viscount Dr	<b>Transaction ID:</b> 10408.E6461 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Virginia Dash Mailing Address 124 Dan Troy Dr City Buffalo State NY Zip Code 14221-3548 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7101 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas Davidson Mailing Address 7 Sunrise Cay Dr City Key Largo State FL Zip Code 33037-5301 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7102 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

**2250.00**

**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  
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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) John Davis	<b>Transaction ID:</b> 10413.E7104 <b>Date of Disbursement</b>
Mailing Address I Squared R Element Co Inc PO Box 390	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Akron State NY Zip Code 14001-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>2000.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Davis	<b>Transaction ID:</b> 10413.E7103 <b>Date of Disbursement</b>
Mailing Address 65 Rollingwood St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>2400.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Paul DeCarolis	<b>Transaction ID:</b> 10408.E6465 <b>Date of Disbursement</b>
Mailing Address 115 Raton Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14626-4503	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>225.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**4625.00**

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
James Derderian

Mailing Address 4720 32nd Street North

City State Zip Code  
Arlington VA 22207-Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012**Transaction ID:** 10413.E7105

Date of Disbursement

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

Amount of Each Disbursement this Period

1250.00

**B.**Full Name (Last, First, Middle Initial)  
Steven Detwiler

Mailing Address 61 Ponderosa Ct

City State Zip Code  
Orchard Park NY 14127-2070Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012**Transaction ID:** 10413.E7106

Date of Disbursement

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

Amount of Each Disbursement this Period

2100.00

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

Mailing Address 76 Barchan Dune Rise

City State Zip Code  
Victor NY 14564-8920Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012**Transaction ID:** 10413.E7107

Date of Disbursement

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

Amount of Each Disbursement this Period

2400.00

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

5750.00

**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:  
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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary DiMatteo	<b>Transaction ID:</b> 10408.E6479
	Mailing Address 3060 Niagara Falls Blvd	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City North Tonawanda State NY Zip Code 14120-	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>250.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	<div>010</div> Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Colleen DiPirro	<b>Transaction ID:</b> 10408.E6481
	Mailing Address 13 Thamesford Ln	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14221-5961	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>425.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	<div>010</div> Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Bernard DiPizio	<b>Transaction ID:</b> 10413.E7109
	Mailing Address 999 Borden Rd	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Depew State NY Zip Code 14043-4623	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>1000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	<div>010</div> Category/ Type

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

**1675.00**

**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)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Rosanne DiPizio Mailing Address 24 Kennedy Rd	<b>Transaction ID:</b> 10413.E7108 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14227-1208 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Douglas Dimitroff Mailing Address 6268 Bridlewood Dr S City East Amherst State NY Zip Code 14051-2023 Purpose of Disbursement Refund of Contribution REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6485 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Dines Mailing Address 6411 Lakemont Ct City East Amherst State NY Zip Code 14051- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6487 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>550.00</div> <div>010</div> Category/ Type

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

1800.00

**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)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Brigid Doherty Mailing Address 21 Lingleaf Dr	<b>Transaction ID:</b> 10408.E6490 <b>Date of Disbursement</b> <div> <div>03</div> <div>04</div> <div>2011</div> </div>
City Buffalo State NY Zip Code 14226- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) David Dooley Mailing Address 925 Delaware Ave Apt 10C City Buffalo State NY Zip Code 14209-1843 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7110 <b>Date of Disbursement</b> <div> <div>03</div> <div>01</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Andrew Dorn Mailing Address 27 Chicory Ln City Lancaster State NY Zip Code 14086-4403 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6495 <b>Date of Disbursement</b> <div> <div>03</div> <div>04</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>300.00</div> <div>010</div> Category/ Type

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

**1800.00**

**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)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Andrew Dorn Mailing Address 5349 Columbia Ave	<b>Transaction ID:</b> 10408.E6496 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1			
M	M	/	D	D	/	Y	Y	Y	Y															
0	3		0	4		2	0	1	1															
City Hamburg State NY Zip Code 14075-5743 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>250.00</td> </tr> </table> <table border="1"> <tr> <td>010</td> </tr> <tr> <td>Category/Type</td> </tr> </table>	250.00	010	Category/Type																				
250.00																								
010																								
Category/Type																								
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Dorschel Mailing Address 5791 Seneca Point Rd City Naples State NY Zip Code 14512-9733 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6497 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>500.00</td> </tr> </table> <table border="1"> <tr> <td>010</td> </tr> <tr> <td>Category/Type</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1	500.00	010	Category/Type
M	M	/	D	D	/	Y	Y	Y	Y															
0	3		0	4		2	0	1	1															
500.00																								
010																								
Category/Type																								
<b>C.</b> Full Name (Last, First, Middle Initial) Laurence Doud, III Mailing Address 18 Melbourne Green City Fairport State NY Zip Code 14450- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6498 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>250.00</td> </tr> </table> <table border="1"> <tr> <td>010</td> </tr> <tr> <td>Category/Type</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1	250.00	010	Category/Type
M	M	/	D	D	/	Y	Y	Y	Y															
0	3		0	4		2	0	1	1															
250.00																								
010																								
Category/Type																								

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

1000.00

**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  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Denis Doyle Mailing Address 8 Bay Point Cir	<b>Transaction ID:</b> 10408.E6499 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14622-3332 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>700.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Kenneth Drake Mailing Address 110 Fairlawn Dr City Buffalo State NY Zip Code 14226- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6500 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>200.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Valerie Duell Mailing Address 30 Gordon Terr City Warsaw State NY Zip Code 14569- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6505 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>510.00</div> <div>010</div> Category/ Type

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

**1410.00**

**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)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Jay Dutcher

Mailing Address 4946 Wyffels Rd

City Canandaigua State NY Zip Code 14424-8364

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6506  
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

240.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas Eagle

Mailing Address 597 Allens Creek Rd

City Rochester State NY Zip Code 14618-3405

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6508  
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward Eberl

Mailing Address PO Box 858

City Buffalo State NY Zip Code 14231-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7111  
Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

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

3040.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Arthur Eddy	<b>Transaction ID:</b> 10408.E6512 <b>Date of Disbursement</b>																				
Mailing Address	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	1	1												
City State Zip Code	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution refund Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012																				
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Elkington	<b>Transaction ID:</b> 10408.E6518 <b>Date of Disbursement</b>																				
Mailing Address 160 Bathurst Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	1	1												
City State Zip Code Tonawanda NY 14150-9004	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012																				
<b>C.</b> Full Name (Last, First, Middle Initial) David Engler	<b>Transaction ID:</b> 10408.E6520 <b>Date of Disbursement</b>																				
Mailing Address PO Box 478	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	1	1												
City State Zip Code East Amherst NY 14031-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution REFUND Candidate Name	<table border="1"> <tr> <td colspan="10">285.00</td> </tr> </table>	285.00																			
285.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012																				

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

**735.00**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Matthew Enstice Mailing Address 63 Ruskin Rd	<b>Transaction ID:</b> 10413.E7116 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14226-4255 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010 Category/ Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Cynthia Fan Mailing Address 8232 Oakway Lane City Buffalo State NY Zip Code 14221- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6526 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010 Category/ Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Bruce Fennie Mailing Address 98 N Country Club Dr City Rochester State NY Zip Code 14618-3724 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10228.E6080 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010 Category/ Type</div>

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

**3650.00**

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



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

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for each category of the  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bruce Fennie	<b>Transaction ID:</b> 10413.E7114 <b>Date of Disbursement</b>
Mailing Address 98 N Country Club Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3724	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>2400.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Dorothy Ferguson	<b>Transaction ID:</b> 10413.E7115 <b>Date of Disbursement</b>
Mailing Address 48 Huntington Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-5310	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1000.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas Ferris	<b>Transaction ID:</b> 10408.E6530 <b>Date of Disbursement</b>
Mailing Address 19 Pinewood Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Spencerport State NY Zip Code 14559-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>750.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**4150.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Laura Fischer

Mailing Address 73 Mooring Line Dr

City Rochester State NY Zip Code 14622-3001

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6533

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert Fischer

Mailing Address 51 Meadow Cove Rd

City Pittsford State NY Zip Code 14534-3350

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7117

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

**C.**

Full Name (Last, First, Middle Initial)  
David Flaum

Mailing Address 3365 Elmwood Ave

City Rochester State NY Zip Code 14610-3425

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7118

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2000.00

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

4900.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Sergio Fornasiero Mailing Address 5854 Main St - Apt 804	<b>Transaction ID:</b> 10413.E7119 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Williamsville State NY Zip Code 14221-5766 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Dick Forrestel Mailing Address 11 Madison Ave City Akron State NY Zip Code 14001-1108 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7259 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Peter Forrestel Mailing Address 16 Stoneridge Ln City Akron State NY Zip Code 14001-1500 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7122 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

4400.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Stephen Forrestel

Mailing Address Cold Spring Construction Co.  
3 Jackson Street

City Akron State NY Zip Code 14001-1349

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7121

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Virginia Forrestel

Mailing Address 11 Madison Ave

City Akron State NY Zip Code 14001-1108

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7120

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Forrestel, Jr.

Mailing Address 4975 Winding Ln

City Clarence State NY Zip Code 14031-1547

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7123

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Anthony Foti Mailing Address 6545 Belle Way	<b>Transaction ID:</b> 10408.E6545 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City East Amherst State NY Zip Code 14051-2817 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>300.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Fox Mailing Address 1171 Clover St City Rochester State NY Zip Code 14610-3367 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7124 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Kenneth Franasiaak Mailing Address 2100 River Rd City Niagara Falls State NY Zip Code 14304-3750 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7125 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type

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

5100.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Christopher Frech	<b>Transaction ID:</b> 10408.E6546 <b>Date of Disbursement</b>
Mailing Address 1653 Fitzgerald Land	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Alexandria State VA Zip Code 22302-	Amount of Each Disbursement this Period
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Kent P. Frey	<b>Transaction ID:</b> 10413.E7030 <b>Date of Disbursement</b>
Mailing Address 5329 Green Valley Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City East Amherst State NY Zip Code 14031-	Amount of Each Disbursement this Period
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Dennis Galluzzo	<b>Transaction ID:</b> 10408.E6559 <b>Date of Disbursement</b>
Mailing Address 37 Wyeth Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Getzville State NY Zip Code 14068-	Amount of Each Disbursement this Period
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**1750.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Gannon

Mailing Address 3507 Valley Dr

City Alexandria State VA Zip Code 22302-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6561

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard Garman

Mailing Address 578 Mill Rd

City East Aurora State NY Zip Code 14052-2831

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7031

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Gloria Garvey

Mailing Address 546 Lana St

City Kailua State HI Zip Code 93573-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6563

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

250.00

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

1750.00

**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)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Sam Geduldig Mailing Address 1519 Pathfinder Lane	<b>Transaction ID:</b> 10413.E7032 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City State Zip Code Mc Lean VA 22101- Purpose of Disbursement Refund of Contribution REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010 Category/ Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Charles George Mailing Address 358 Deerhurst Pk City State Zip Code Buffalo NY 14223- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6568 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010 Category/ Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Richard George Mailing Address 14 Oakfield Way City State Zip Code Pittsford NY 14534- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6569 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010 Category/ Type</div>

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

1750.00

**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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Dan Gernatt, Jr. Mailing Address PO Box 400	<b>Transaction ID:</b> 10413.E7033 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City State Zip Code Collins NY 14034-0400 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>4425.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher Giblin Mailing Address 1304 Chancelo Place City State Zip Code Alexandria VA 22314- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6570 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Constance Gicewicz Mailing Address 410 Tonawanda Creek Rd City State Zip Code Buffalo NY 14228-1217 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7034 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1750.00</div> <div>010</div> Category/ Type

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

**6425.00**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Anthony Gioia	<b>Transaction ID:</b> 10413.E7036
	Mailing Address 55 Meadow Rd	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14216-3613	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>2400.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) Donna Gioia	<b>Transaction ID:</b> 10408.E6572
	Mailing Address 55 Meadow Rd	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14216-3613	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>500.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Gioia	<b>Transaction ID:</b> 10413.E7035
	Mailing Address 925 Delaware Ave #7B	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14209-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>1000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	

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

**3900.00**

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
Carolyn Giroux

Mailing Address 9034 Ridge Rd

City Gasport State NY Zip Code 14067-9408

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6574

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

700.00

**B.**Full Name (Last, First, Middle Initial)  
Stephen Giroux

Mailing Address 9034 Ridge Rd

City Gasport State NY Zip Code 14067-9408

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6575

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

800.00

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

Mailing Address 9034 Ridge Rd

City Gasport State NY Zip Code 14067-9408

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7260

Date of Disbursement

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

Amount of Each Disbursement this Period

1600.00

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

3100.00

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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Glaser	<b>Transaction ID:</b> 10408.E6576 Date of Disbursement
	Mailing Address 5039 Shale Bluff Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City East Amherst State NY Zip Code 14031-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010 Category/ Type</div>	<div>250.00</div>
	<div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</div>	
<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen Glaser	<b>Transaction ID:</b> 10413.E7037 Date of Disbursement
	Mailing Address 7 Old Settlers Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Pittsford State NY Zip Code 14534-4651	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010 Category/ Type</div>	<div>1000.00</div>
	<div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</div>	
<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher Glynn	<b>Transaction ID:</b> 10408.E6578 Date of Disbursement
	Mailing Address 35 Evermay Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14221-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010 Category/ Type</div>	<div>500.00</div>
	<div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</div>	

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

1750.00

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

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

Use separate schedule(s)  
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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) William Goodrich Mailing Address 20 Beauclaire Ln	<b>Transaction ID:</b> 10413.E7038 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Fairport State NY Zip Code 14450- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010 Category/ Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Morgan Graham Mailing Address 704 Auburn Ave City Buffalo State NY Zip Code 14222-1417 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6581 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010 Category/ Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Paul Granville Mailing Address 4790 Sheridan Dr City Williamsville State NY Zip Code 14221-4435 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7039 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1500.00</div> <div>010 Category/ Type</div>

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

2750.00

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

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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Robert Gray

Mailing Address 6354 Alderman Dr

City Alexandria	State VA	Zip Code 22315-3731
--------------------	-------------	------------------------

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6586

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

James Green

Mailing Address 24 Coleman Ave

City Spencerport	State NY	Zip Code 14559-
---------------------	-------------	--------------------

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6587

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Gerry Greenan, III

Mailing Address 51 Rolling Hills Dr

City Buffalo	State NY	Zip Code 14224-4109
-----------------	-------------	------------------------

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6588

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

300.00

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

750.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher Greene	<b>Transaction ID:</b> 10413.E7040
	Mailing Address 4 Clarendon PI	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14209-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>1000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) William Gresser	<b>Transaction ID:</b> 10408.E6591
	Mailing Address 4357 N 66th St	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City Scottsdale State AZ Zip Code 85251-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>375.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) Peter Grollitsch	<b>Transaction ID:</b> 10408.E6609
	Mailing Address PO Box 768	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14231-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>220.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	

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

1595.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Joseph Gulant Mailing Address 5 Woodacres Rd	<b>Transaction ID:</b> 10413.E7041 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City State Zip Code Glen Head NY 11545- Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div> <div>010 Category/Type</div>	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Amelia Habib Mailing Address 845 Lebrun Rd City State Zip Code Buffalo NY 14226-4206 Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div> <div>010 Category/Type</div>	<b>Transaction ID:</b> 10408.E6604 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Jane Hager Mailing Address 38 Cardinal Lane City State Zip Code Key Largo FL 33037- Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div> <div>010 Category/Type</div>	<b>Transaction ID:</b> 10408.E6603 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>200.00</div>

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

1700.00

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



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bob Hall	<b>Transaction ID:</b> 10408.E6602 <b>Date of Disbursement</b>
Mailing Address 3 Woodpointe Run	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div>010 Category/ Type</div>	<div>300.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Hamister	<b>Transaction ID:</b> 10413.E7261 <b>Date of Disbursement</b>
Mailing Address 136 Harbridge Manor	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div>010 Category/ Type</div>	<div>2400.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) James Hammer	<b>Transaction ID:</b> 10408.E6600 <b>Date of Disbursement</b>
Mailing Address 12 Windham HI	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Mendon State NY Zip Code 14506-9745	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div>010 Category/ Type</div>	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**3200.00**

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

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

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for each category of the  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Jeffrey Hammond	<b>Transaction ID:</b> 10413.E7042 <b>Date of Disbursement</b>
Mailing Address 83 Bryant St Apt 4B	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14209-1831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Fred Hanania	<b>Transaction ID:</b> 10413.E7043 <b>Date of Disbursement</b>
Mailing Address 376 Argonne Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14217-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Frank Harding	<b>Transaction ID:</b> 10413.E7044 <b>Date of Disbursement</b>
Mailing Address 108 Lake Ledge Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Williamsville State NY Zip Code 14221-5752	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1400.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**3650.00**

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Timothy Harner Mailing Address 8 Valley Park Cir	<b>Transaction ID:</b> 10413.E7045 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City State Zip Code Spencerport NY 14559-1560 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Harrington Mailing Address 8346 Black Walnut Dr City State Zip Code East Amherst NY 14051- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6617 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) David Hart Mailing Address 35 Edgewater Dr City State Zip Code Orchard Park NY 14127-3367 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7046 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

**3900.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Warren Hasman

Mailing Address 184 Scotch Pine Dr

City State Zip Code  
Rochester NY 14616-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6618

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

William Haugland

Mailing Address 15 Sunrise Cay Dr

City State Zip Code  
Key Largo FL 33037-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7047

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

David Hayes

Mailing Address 113 Knob Hill Rd

City State Zip Code  
Orchard Park NY 14127-3938

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6622

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

250.00

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

2750.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Christopher Henderson Mailing Address 110 Hidden Ridge Cmn	<b>Transaction ID:</b> 10413.E7048 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Williamsville State NY Zip Code 14221-5785 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Christian Henrich Mailing Address 9 Ventura Dr City Orchard Park State NY Zip Code 14127- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6628 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Warren Hern Mailing Address 12 Cheshire Rdg City Victor State NY Zip Code 14564-8982 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6631 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

2000.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
John Hettrick, Jr.

Mailing Address 115 Meadow Rd

City Buffalo State NY Zip Code 14216-3613

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6633

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

500.00

**B.**Full Name (Last, First, Middle Initial)  
Mary Lou Hetzke

Mailing Address 303 Whittier Rd

City Spencerport State NY Zip Code 14559-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6634

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

260.00

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

Mailing Address 12 Tobey Brk

City Pittsford State NY Zip Code 14534-1820

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6637

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

500.00

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

1260.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Richard Hilliker

Mailing Address 5892 Main Street

City Buffalo State NY Zip Code 14221-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

**Transaction ID:** 10408.E6639

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

335.00

**B.**

Full Name (Last, First, Middle Initial)  
John D. Hoffman

Mailing Address 9578 Cobblestone Dr

City Clarence State NY Zip Code 14031-2422

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

**Transaction ID:** 10408.E6642

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul Hogan

Mailing Address 48 Oakland Place

City Buffalo State NY Zip Code 14222-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

**Transaction ID:** 10413.E7049

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1250.00

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

1835.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) David Hohn	<b>Transaction ID:</b> 10408.E6643
	Mailing Address 900 Delaware Ave, Apt 501	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14209-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>500.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div> <div>Disbursement For: 2012</div> <div><input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input checked="" type="checkbox"/> Other (specify) ▼</div> </div> </div>	
	State: District: Primary 2012	
<b>B.</b>	Full Name (Last, First, Middle Initial) Susan Holliday	<b>Transaction ID:</b> 10413.E7050
	Mailing Address 70 Lanning Rd	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Honeoye Falls State NY Zip Code 14472-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>2400.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div> <div>Disbursement For: 2012</div> <div><input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input checked="" type="checkbox"/> Other (specify) ▼</div> </div> </div>	
	State: District: Primary 2012	
<b>C.</b>	Full Name (Last, First, Middle Initial) Jay Holmes	<b>Transaction ID:</b> 10413.E7051
	Mailing Address 42 Spadefish Ln	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
	City Key Largo State FL Zip Code 33037-5226	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>3000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div> <div>Disbursement For: 2012</div> <div><input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input checked="" type="checkbox"/> Other (specify) ▼</div> </div> </div>	
	State: District: Primary 2012	

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

**5900.00**

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



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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Markus Holzhauser Mailing Address 5967 Corinne Lane	<b>Transaction ID:</b> 10408.E6647 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City State Zip Code Clarence Center NY 14032- Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>250.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Ann Hopkins Mailing Address 49 Cleveland Ave City State Zip Code Buffalo NY 14222- Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Primary 2012	<b>Transaction ID:</b> 10408.E6648 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) David Horan Mailing Address 10120 Crosby Pl City State Zip Code Port St Lucie FL 34986-3050 Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Primary 2012	<b>Transaction ID:</b> 10408.E6650 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div>

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

**1000.00**

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Harry Howe	<b>Transaction ID:</b> 10408.E6669 <b>Date of Disbursement</b>
Mailing Address 316 Oxford St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14607-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div> <div></div> <div>300.00</div> </div>
Candidate Name	<div> <div>010</div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Howard Howlett	<b>Transaction ID:</b> 10408.E6670 <b>Date of Disbursement</b>
Mailing Address 125 East Terrace Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Lakewood State NY Zip Code 14750-1331	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div> <div></div> <div>350.00</div> </div>
Candidate Name	<div> <div>010</div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Hoyt	<b>Transaction ID:</b> 10408.E6671 <b>Date of Disbursement</b>
Mailing Address 30 Sunset Cay Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Key Largo State FL Zip Code 33037-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div> <div></div> <div>250.00</div> </div>
Candidate Name	<div> <div>010</div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**900.00**

**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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
David Huck

Mailing Address 6278 Gott Creek Trail

City East Amherst State NY Zip Code 14051-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6673

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Brian Huckle

Mailing Address 5632 E Creek Rd

City South Wales State NY Zip Code 14139-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6674

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Dale Hudson

Mailing Address 270 Darwin Dr

City Buffalo State NY Zip Code 14226-4862

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6675

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

275.00

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

1025.00

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Peter Humphrey Mailing Address 230 West Buffalo St	<b>Transaction ID:</b> 10413.E7052 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Warsaw State NY Zip Code 14569-1238 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) R. Brian Hunt Mailing Address 13 Osprey Lane City Key Largo State FL Zip Code 33037- Purpose of Disbursement Refund of Contribution REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7053 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Robert W. Hurlbut Mailing Address 295 Ambassador Dr City Rochester State NY Zip Code 14610-3404 Purpose of Disbursement Refund of Contribution REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7054 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type

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

**4400.00**

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Bernard Iacovangelo

Mailing Address 20 Autumn Wood

City	State	Zip Code
Rochester	NY	14624-5316

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State:	Primary 2012
District:	

Transaction ID: 10413.E7055

Date of Disbursement

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

Amount of Each Disbursement this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)

Lori Ioele

Mailing Address 454 Hunters Pointe

City	State	Zip Code
Pittsford	NY	14534-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State:	Primary 2012
District:	

Transaction ID: 10413.E7056

Date of Disbursement

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

Amount of Each Disbursement this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Tom Ioele

Mailing Address 27 Woodcreek Drive

City	State	Zip Code
Pittsford	NY	14534-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State:	Primary 2012
District:	

Transaction ID: 10413.E7057

Date of Disbursement

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

Amount of Each Disbursement this Period

2400.00

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

6300.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Clinton Ivins Mailing Address 35 Lexington Ave	<b>Transaction ID:</b> 10408.E6686 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14222-1807 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>200.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher Jacobs Mailing Address 120 W Tupper St - Ste 1 City Buffalo State NY Zip Code 14201- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6687 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Jeremy Jacobs Mailing Address 1600 North Davis RD City East Aurora State NY Zip Code 14052- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7061 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

1450.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Louis Jacobs

Mailing Address 93 Elmwood Ave

City East Aurora State NY Zip Code 14052-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7059

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Luke Jacobs

Mailing Address 120 W Tupper St

City Buffalo State NY Zip Code 14201-2170

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7058

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Margaret Jacobs

Mailing Address 1300 N Davis Rd

City East Aurora State NY Zip Code 14052-9473

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7060

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2000.00

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

A.

Full Name (Last, First, Middle Initial)  
Pamela Jacobs Vogt

Mailing Address 24 Middlesex Rd

City Buffalo State NY Zip Code 14216-3616

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7062

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)  
Jeremy M. Jacobs, Sr.

Mailing Address 1300 N Davis Rd

City East Aurora State NY Zip Code 14052-9473

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7063

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)  
Ronald Jarvis

Mailing Address 590 Sweet Home Rd

City Buffalo State NY Zip Code 14226-2216

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6690

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

200.00

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

4200.00

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)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Donald Jeffries	<b>Transaction ID:</b> 10408.E6691 <b>Date of Disbursement</b>
Mailing Address 75 Danbury Cir N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-2715	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Erin Johnston	<b>Transaction ID:</b> 10408.E6693
Mailing Address 103 Highland Ave	<b>Date of Disbursement</b> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div>
City Buffalo State NY Zip Code 14222-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>600.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Edwin Johnston III	<b>Transaction ID:</b> 10408.E6694
Mailing Address Sandhill Investment Management 360 Delaware Ave	<b>Date of Disbursement</b> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div>
City Buffalo State NY Zip Code 14202-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type

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

1600.00

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

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Charles Jones

Mailing Address 26 Randwood Ln

City Buffalo State NY Zip Code 14216-3507

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7064

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
William Joyce

Mailing Address 74 Keswick Rd

City Snyder State NY Zip Code 14226-4249

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7065

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Judson

Mailing Address 7286 Townline Rd

City Victor State NY Zip Code 14564-9140

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7066

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

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

4400.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Philip Kahn

Mailing Address 5 Gorham Ave

City  
LivingstonState  
NJZip Code  
07039-Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Primary 2012

Transaction ID: 10413.E7126

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Ronald Kareken

Mailing Address 2409-3 East Ave

City  
RochesterState  
NYZip Code  
14610-Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Primary 2012

Transaction ID: 10413.E7254

Date of Disbursement

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

Amount of Each Disbursement this Period

2400.00

**C.**

Full Name (Last, First, Middle Initial)

James Karls

Mailing Address 1320 Sagebrook Way

City  
WebsterState  
NYZip Code  
14580-Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Primary 2012

Transaction ID: 10408.E6701

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

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

3900.00

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  
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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

A.

Full Name (Last, First, Middle Initial)

James Kaskie

Mailing Address 46 Penhurst Park

City  
Buffalo

State  
NY

Zip Code  
14222-1014

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6703

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Kent Keating

Mailing Address 573 Kaymar Dr

City  
Buffalo

State  
NY

Zip Code  
14228-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6704

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mark Keeler

Mailing Address 4955 Pine Hill Rd

City  
Albion

State  
NY

Zip Code  
14411-9241

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6705

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

500.00

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

1300.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Carol Kehl

Mailing Address 1141 Route 20A

City Strykersville State NY Zip Code 14145-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6706

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Kevin Kelley

Mailing Address 5 Minon St

City Honeoye Falls State NY Zip Code 14472-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7127

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephen Kelley

Mailing Address 15 Avon Rd

City Geneseo State NY Zip Code 14454-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7128

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

2400.00

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

3600.00

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

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

Use separate schedule(s)  
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<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey Keswin

Mailing Address 500 West End Ave - Apt 6AB

City State Zip Code  
New York NY 10024-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7129

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Jonathan Kislak

Mailing Address Antares Capital Corporation  
9999 NE 2nd Ave - Ste 306

City State Zip Code  
Miami Shores FL 33138-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7130

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
David Klein

Mailing Address 62 Meadow Cove Rd

City State Zip Code  
Pittsford NY 14534-3351

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7131

Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Christopher Knospe Mailing Address 16 Chicory Ln	<b>Transaction ID:</b> 10408.E6719 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Lancaster State NY Zip Code 14086-4404 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>275.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) John Koelmel Mailing Address 8104 Floss Lane City East Amherst State NY Zip Code 14051- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7132 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Mary Koessler Mailing Address S6122 Old Lake Shore Rd City Lake View State NY Zip Code 14085-9547 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6721 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>400.00</div> <div>010</div> Category/ Type

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

**1675.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Paul Kolaczynski

Mailing Address 232 Enchanted Forest N

City State Zip Code  
Depew NY 14043-5013

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7134  
Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Brian Kolb

Mailing Address 128 Kennedy St

City State Zip Code  
Canandaigua NY 14424-1046

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6722  
Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Krabak

Mailing Address 104 Chapin Pkwy

City State Zip Code  
Buffalo NY 14209-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7135  
Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

1000.00

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

3000.00

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



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Kresse	<b>Transaction ID:</b> 10413.E7136 <b>Date of Disbursement</b>
Mailing Address 800 W Ferry St Apt 4A	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14222-1649	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Kucharski	<b>Transaction ID:</b> 10408.E6733 <b>Date of Disbursement</b>
Mailing Address 8295 Manchester PArk Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City East Amherst State NY Zip Code 14051-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Salvatore Labella	<b>Transaction ID:</b> 10413.E7137 <b>Date of Disbursement</b>
Mailing Address 110 Shingle Landing Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14609-2067	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

2750.00

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

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

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for each category of the  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Patrick Lahr

Mailing Address 9680 Rocky Pt

City State Zip Code  
Clarence NY 14031-1588

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6740

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert Lamantia

Mailing Address 65 Elmhurst Rd

City State Zip Code  
Snyder NY 14226-3539

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6742

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Landi

Mailing Address Brain & Spine Center  
400 International Dr

City State Zip Code  
Buffalo NY 14221-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7138

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

1500.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Lane Mailing Address 5583 Truscott Ter	<b>Transaction ID:</b> 10413.E7139 <b>Date of Disbursement</b> <div> <div>03</div> <div>01</div> <div>2011</div> </div>
City Lake View State NY Zip Code 14085-9748 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Latour Mailing Address 5 Miller Ct City Rochester State NY Zip Code 14618- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6750 <b>Date of Disbursement</b> <div> <div>03</div> <div>07</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Gina Laversa Mailing Address 15 Grosvenor Pl City Great Neck State NY Zip Code 11021- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7140 <b>Date of Disbursement</b> <div> <div>03</div> <div>01</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

**3250.00**

**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  
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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ivan Lavinsky Mailing Address 5537 Waverly Ave	<b>Transaction ID:</b> 10413.E7141 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City La Jolla State CA Zip Code 92037- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010 Category/ Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Wayne LeChase Mailing Address 420 Windward Shores Dr	<b>Transaction ID:</b> 10413.E7142 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Webster State NY Zip Code 14580-1067 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2000.00</div> <div>010 Category/ Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Cynthia Lee Mailing Address 224 Rivermist Dr	<b>Transaction ID:</b> 10413.E7262 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14202-4310 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010 Category/ Type</div>

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

5400.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) James Lee	<b>Transaction ID:</b> 10408.E6764 <b>Date of Disbursement</b>
Mailing Address 30 Dart St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14213-1051	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution REFUND Candidate Name	<div> <div>300.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) John Lee	<b>Transaction ID:</b> 10413.E7143 <b>Date of Disbursement</b>
Mailing Address 24 Dockside Lane #179	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City Key Largo State FL Zip Code 33037-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>2000.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Patrick P. Lee	<b>Transaction ID:</b> 10413.E7263 <b>Date of Disbursement</b>
Mailing Address 224 Rivermist Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14202-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>2400.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**4700.00**

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

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

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for each category of the  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Patrick W. Lee Mailing Address 354 Forest Edge Dr	<b>Transaction ID:</b> 10413.E7264 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City East Amherst State NY Zip Code 14051-1246 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Nelson B. Leenhouts Mailing Address 62 Woodbury Pl City Rochester State NY Zip Code 14618-3445 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7144 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1300.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Maria Lehman Mailing Address 5162 Ellicott Rd City Orchard Park State NY Zip Code 14127-3331 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6767 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

**4200.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Richard Lewis

Mailing Address 12 Briarhill Rd

City State Zip Code  
Williamsville NY 14221-1807

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7145

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Lichtman

Mailing Address 8 Maplewood Dr

City State Zip Code  
Plainview NY 11803-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7147

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Brian Lipke

Mailing Address 6858 Old Lake Shore Road

City State Zip Code  
Derby NY 14047-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7148

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

2000.00

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

4500.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Gerald Lippes	<b>Transaction ID:</b> 10413.E7149
	Mailing Address 665 Main St - Ste 300	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
	City Buffalo State NY Zip Code 14203-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>2400.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) Kevin LoVullo	<b>Transaction ID:</b> 10413.E7151
	Mailing Address 610 Cottonwood Dr	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
	City Williamsville State NY Zip Code 14221-1356	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>2400.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) Leonard LoVullo	<b>Transaction ID:</b> 10413.E7150
	Mailing Address 2 Landing Creek Ct	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
	City Williamsville State NY Zip Code 14221-2001	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div> <div>010</div> <div>Category/ Type</div> </div> </div>	<div>1000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>           Disbursement For: 2012  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼            Primary 2012         </div> </div>	
	State: District:	

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

**5800.00**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Michael Luxenberg

Mailing Address 440 Washington St

City State Zip Code  
Orange NJ 07050-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7152

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

William Maggio

Mailing Address 22 Linden Ave

City State Zip Code  
Buffalo NY 14214-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6755

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Gregory Maher

Mailing Address 61 Chapel Woods

City State Zip Code  
Williamsville NY 14221-1814

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6757

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

250.00

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

1750.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
Allen Mann

Mailing Address 8091 Clarherst Dr

City State Zip Code  
East Amherst NY 14051-1519Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

State: District:

Transaction ID: 10413.E7153

Date of Disbursement

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

Amount of Each Disbursement this Period

1500.00

**B.**Full Name (Last, First, Middle Initial)  
Hormoz Mansouri

Mailing Address 43 Rolling Meadow Ln

City State Zip Code  
East Amherst NY 14051-1807Purpose of Disbursement  
Refund of Contribution Refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

State: District:

Transaction ID: 10408.E6319

Date of Disbursement

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

Amount of Each Disbursement this Period

250.00

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

Mailing Address 5563 Via Marina

City State Zip Code  
Buffalo NY 14221-2843Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

State: District:

Transaction ID: 10413.E7154

Date of Disbursement

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

Amount of Each Disbursement this Period

1150.00

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

2900.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Donald Maricle

Mailing Address 42 Pine Tree Lane

City Buffalo State NY Zip Code 14224-

Purpose of Disbursement  
Refund of Contribution Refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6324

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Anthony Martino

Mailing Address 24 Lincoln Parkway

City Buffalo State NY Zip Code 14222-1230

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6659

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Victor Martucci

Mailing Address 10040 Highview Ct

City Clarence State NY Zip Code 14031-1525

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7155

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

1000.00

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

1775.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Gerard Mazurkiewicz

Mailing Address 45 Liberty Ln

City State Zip Code  
West Seneca NY 14224-3720

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6789

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary McCollum

Mailing Address 12 Osprey Lane

City State Zip Code  
Key Largo FL 33037-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6792

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert McCrory

Mailing Address 16 Sand Brook Rd

City State Zip Code  
Pittsford NY 14534-3561

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10228.E6086

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

600.00

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

1300.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Robert McCrory Mailing Address 16 Sand Brook Rd	<b>Transaction ID:</b> 10413.E7156 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Pittsford State NY Zip Code 14534-3561 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1800.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Shawn McCutcheon Mailing Address 2011 S Helena City Spokane State WA Zip Code 99203- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7157 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Donna McGuire Mailing Address 476 N Forest Rd City Buffalo State NY Zip Code 14221-5037 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7158 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

4800.00

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Anthony W. McKenna Mailing Address PO Box 722	<b>Transaction ID:</b> 10413.E7159 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Olcott State NY Zip Code 14126- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas McMahon Mailing Address 3527 Pleasant Ave City Hamburg State NY Zip Code 14075-4601 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6811 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Jennifer McNamara Mailing Address 141 Stonehenge Dr City Orchard Park State NY Zip Code 14127-2846 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6817 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>200.00</div> <div>010</div> Category/ Type
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>1700.00</div>
<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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Jennifer McNamara	<b>Transaction ID:</b> 10413.E7265 <b>Date of Disbursement</b>
Mailing Address 141 Stonehenge Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Orchard Park State NY Zip Code 14127-2846	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>2200.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph McNamara	<b>Transaction ID:</b> 10408.E6818 <b>Date of Disbursement</b>
Mailing Address 118 Breezewood Cmn	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City East Amherst State NY Zip Code 14051-1425	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>250.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) William McNamara	<b>Transaction ID:</b> 10408.E6815 <b>Date of Disbursement</b>
Mailing Address 141 Stonehenge Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Orchard Park State NY Zip Code 14127-2846	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>200.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

2650.00

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) William McNamara Mailing Address 141 Stonehenge Dr	<b>Transaction ID:</b> 10413.E7266 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Orchard Park State NY Zip Code 14127-2846 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2200.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) James Meenan Mailing Address 24 Dockside Lane #240 City Key Largo State FL Zip Code 33037- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7160 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey Meilman Mailing Address 811 Maple Rd City Buffalo State NY Zip Code 14221-3260 Purpose of Disbursement Refund of Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6315 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 8 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type

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

**3450.00**

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
Dorothy Merrill

Mailing Address 111 Coventry Rd

City Buffalo State NY Zip Code 14221-6643

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7161

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00

**B.**Full Name (Last, First, Middle Initial)  
Thomas Mesce

Mailing Address 383 Parish Dr

City Wayne State NJ Zip Code 07470-4664

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7162

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 640 Essjay Rd Villa A

City Buffalo State NY Zip Code 14221-

Purpose of Disbursement  
Refund of Contribution Refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6296

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Amount of Each Disbursement this Period

250.00

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

3250.00

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
Peter Metzger

Mailing Address 81 West Falls Rd

City State Zip Code  
West Falls NY 14170-Purpose of Disbursement  
Refund of Contribution Refund  
Candidate Name010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012Transaction ID: 10408.E6298  
Date of DisbursementM M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 1 1

Amount of Each Disbursement this Period

500.00

**B.**Full Name (Last, First, Middle Initial)  
Igor Mikityansky

Mailing Address 16 Cape Cod Lane

City State Zip Code  
East Amherst NY 14051-Purpose of Disbursement  
Refund of Contribution Refund  
Candidate Name010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012Transaction ID: 10408.E6301  
Date of DisbursementM M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 1 1

Amount of Each Disbursement this Period

300.00

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

Mailing Address 10380 Bergtold Rd

City State Zip Code  
East Amherst NY 14031-Purpose of Disbursement  
Refund of Contribution Refund  
Candidate Name010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012Transaction ID: 10408.E6302  
Date of DisbursementM M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 1 1

Amount of Each Disbursement this Period

600.00

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

1400.00

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

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Miller	<b>Transaction ID:</b> 10413.E7163 Date of Disbursement
	Mailing Address do not contact	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
	City Clarence State NY Zip Code 14031-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> <div>010 Category/ Type</div> </div>	<div>2400.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	
<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Mills	<b>Transaction ID:</b> 10408.E6305 Date of Disbursement
	Mailing Address 13524 Hunting Hill Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 1 1</div> </div>
	City North Potomac State MD Zip Code 20878-4834	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution Refund</div> <div>Candidate Name</div> <div>010 Category/ Type</div> </div>	<div>750.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	
<b>C.</b>	Full Name (Last, First, Middle Initial) John Milne	<b>Transaction ID:</b> 10408.E6306 Date of Disbursement
	Mailing Address 409 G Street SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 1 1</div> </div>
	City Washington State DC Zip Code 20003-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution Refund</div> <div>Candidate Name</div> <div>010 Category/ Type</div> </div>	<div>500.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	

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

**3650.00**

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Joann Milsom Mailing Address PO Box 87	<b>Transaction ID:</b> 10413.E7164 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	1	1		
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	3		2	0	1	1														
City Buffalo State NY Zip Code 14225-0087 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2400.00</td> </tr> </table> <table border="1"> <tr> <td>010</td> </tr> </table> Category/ Type	2400.00	010																				
2400.00																							
010																							
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Minicucci Mailing Address 453 Woodland Ct City Youngstown State NY Zip Code 14174- Purpose of Disbursement Refund of Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6307 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>250.00</td> </tr> </table> <table border="1"> <tr> <td>010</td> </tr> </table> Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	1	1	250.00	010
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	4		2	0	1	1														
250.00																							
010																							
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas Moran Mailing Address 10 Oak St City Geneseo State NY Zip Code 14454-1306 Purpose of Disbursement Refund of Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6311 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>250.00</td> </tr> </table> <table border="1"> <tr> <td>010</td> </tr> </table> Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	1	1	250.00	010
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	4		2	0	1	1														
250.00																							
010																							

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

2900.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Acea Mosey Mailing Address 625 Delaware Ave Ste 304	<b>Transaction ID:</b> 10408.E6824 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14202-1007 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Frederick Munschauer Mailing Address 135 Clarendon St - Apt 11W City Boston State MA Zip Code 02116- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7165 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Murphy Mailing Address 24 Dockside Lane # 39 City Key Largo State FL Zip Code 33037- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7168 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

**2250.00**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Vaibhav Nalwaya Mailing Address 46 Lupine Ave	<b>Transaction ID:</b> 10408.E6827 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City San Francisco State CA Zip Code 94118- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Beth Anne Napier Mailing Address 3211 East Ave City Rochester State NY Zip Code 14618-3429 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7171 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Jane Napier Mailing Address 111 Nautical Way City Jupiter State FL Zip Code 33477- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7172 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type

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

5300.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mary Louise Napier

Mailing Address 200 E 16th Street, Apt 8GH

City State Zip Code  
New York NY 10003-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7170  
Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Naples ONeill

Mailing Address S5100 Lake Shore Rd

City State Zip Code  
Hamburg NY 14075-5723

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7173  
Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Brian Neff

Mailing Address PO Box 6239

City State Zip Code  
Stateline NV 89449-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6831  
Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

500.00

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

3900.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Donald Newman Mailing Address 9800 Hollingson Rd	<b>Transaction ID:</b> 10413.E7175 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-1506 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Newman Mailing Address 23 Four Seasons Rd W City Buffalo State NY Zip Code 14226- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7176 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Reginald Newman Mailing Address 65 Briarhill Rd City Williamsville State NY Zip Code 14221-1808 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7255 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type

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

**4400.00**

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



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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Burt Notarius

Mailing Address 14 Stratford Ct

City State Zip Code  
East Amherst NY 14051-1765

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7177

Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
James Nowak

Mailing Address 52 Eltham Dr

City State Zip Code  
Snyder NY 14226-4109

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6838

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)  
Catherine Nugent-Panepinto

Mailing Address 153 Bidwell Parkway

City State Zip Code  
Buffalo NY 14222-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6839

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

250.00

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

1850.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Timothy OConnor	<b>Transaction ID:</b> 10413.E7178 <b>Date of Disbursement</b>
Mailing Address 770 Lafayette Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14222-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1000.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Alphonso ONeil-White	<b>Transaction ID:</b> 10408.E6842 <b>Date of Disbursement</b>
Mailing Address 15 Woodhaven Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14226-4352	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>500.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Erik ONEill	<b>Transaction ID:</b> 10413.E7179 <b>Date of Disbursement</b>
Mailing Address 43 Raphael Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Williamsville State NY Zip Code 14221-2772	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1200.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

2700.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Gina ONeill

Mailing Address 43 Raphael Court

City Buffalo State NY Zip Code 14221-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6843

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas ONeill

Mailing Address S5100 Lake Shore Rd

City Hamburg State NY Zip Code 14075-5723

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7194

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Ottley

Mailing Address 761 Attridge Rd

City Churchville State NY Zip Code 14428-9712

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6849

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

200.00

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

1700.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Duane Paddock, Jr.	<b>Transaction ID:</b> 10413.E7195 <b>Date of Disbursement</b>
Mailing Address 5050 Rockledge Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-2425	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>2400.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Carl Paladino	<b>Transaction ID:</b> 10413.E7267 <b>Date of Disbursement</b>
Mailing Address 282 Potters Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14220-2526	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>2400.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Mary Catherine Paladino	<b>Transaction ID:</b> 10413.E7196 <b>Date of Disbursement</b>
Mailing Address 210 Ellicott St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14203-2219	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution REFUND Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>2400.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**7200.00**

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

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Walter Parkes

Mailing Address 4 Kerrygold Lane

City Pittsford State NY Zip Code 14534-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General

☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7197

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Pascoe

Mailing Address 3771 Shearman Rd

City Perry State NY Zip Code 14530-9305

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General

☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6860

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Dean Penman

Mailing Address 4015 Casillio Pkwy

City Clarence State NY Zip Code 14031-2047

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General

☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7198

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2400.00

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

3650.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian Perry	<b>Transaction ID:</b> 10408.E6870 <b>Date of Disbursement</b>
	Mailing Address 12 Stoneridge Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
	City Akron State NY Zip Code 14001-1500	<b>Amount of Each Disbursement this Period</b>
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div> <div>010</div> <div>Category/ Type</div> </div>	<div>285.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	
<b>B.</b>	Full Name (Last, First, Middle Initial) John Perry	<b>Transaction ID:</b> 10413.E7199 <b>Date of Disbursement</b>
	Mailing Address 130 Ruskin Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
	City Snyder State NY Zip Code 14226-4265	<b>Amount of Each Disbursement this Period</b>
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div> <div>010</div> <div>Category/ Type</div> </div>	<div>1000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	
<b>C.</b>	Full Name (Last, First, Middle Initial) Ann Briody Petock	<b>Transaction ID:</b> 10408.E6871 <b>Date of Disbursement</b>
	Mailing Address 6423 OConnor Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
	City Lockport State NY Zip Code 14094-	<b>Amount of Each Disbursement this Period</b>
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div> <div>010</div> <div>Category/ Type</div> </div>	<div>500.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	

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

1785.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Frederick Pierce	<b>Transaction ID:</b> 10408.E6876 <b>Date of Disbursement</b>
Mailing Address 70 W Chippewa St Ste 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14202-2013	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div> <div></div> <div>500.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Erich Postler	<b>Transaction ID:</b> 10413.E7200 <b>Date of Disbursement</b>
Mailing Address 19 Mid Ponds Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Pittsford State NY Zip Code 14534-1890	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div> <div></div> <div>1000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Priest	<b>Transaction ID:</b> 10413.E7201 <b>Date of Disbursement</b>
Mailing Address 651 Mountain View Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Lewiston State NY Zip Code 14092-1911	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution REFUND Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div> <div></div> <div>1500.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**3000.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Gerald R. Prout Mailing Address 6206 Sally Ford Ct	<b>Transaction ID:</b> 10408.E6890 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City State Zip Code Fairfax Station VA 22039-1347 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Lawrence Quigliano Mailing Address 7380 Graydon Dr City State Zip Code North Tonawanda NY 14120- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6892 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Rafalowicz Mailing Address One Fenimore Rd City State Zip Code Wykagyl NY 10804- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6894 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

1000.00

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



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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mitchell Rechler

Mailing Address 7 Greenhouse Lane

City State Zip Code  
Glen Head NY 11545-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7202

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Redding

Mailing Address 130 Biondo Ct

City State Zip Code  
Rush NY 14543-9448

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6900

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Kathryn Reid

Mailing Address 11 Harding Ave

City State Zip Code  
Lockport NY 14094-6020

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7203

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2400.00

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

3900.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Paul Reid

Mailing Address 11 Harding Ave

City Lockport State NY Zip Code 14094-6020

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7204

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Ronald Rettner

Mailing Address Rettner Management Corporation  
481 Main Street, Suite 503

City New Rochelle State NY Zip Code 10801-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7268

Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

2400.00

**C.**

Full Name (Last, First, Middle Initial)  
Barbara Rhee

Mailing Address 103 Dulany Pl

City Falls Church State VA Zip Code 22046-4082

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7269

Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

2400.00

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

7200.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) John Rhee Mailing Address 103 Dulany Pl	<b>Transaction ID:</b> 10413.E7270 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Falls Church State VA Zip Code 22046-4082 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Kee Rhee Mailing Address 36 Clearview Ct N City Palm Coast State FL Zip Code 32137-8345 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6905 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>200.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Calvin Rhoney Mailing Address 2 Taylor St City Middleport State NY Zip Code 14105-1200 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6906 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>585.00</div> <div>010</div> Category/ Type

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

**3185.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Corinne Rice

Mailing Address 33 Tudor Place

City Buffalo State NY Zip Code 14220-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7206

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Victor Rice

Mailing Address 33 Tudor Pl

City Buffalo State NY Zip Code 14222-1615

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7205

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2400.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Rich

Mailing Address 81100 Old Hwy

City Islamorada State FL Zip Code 33036-3715

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7207

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

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

5800.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Richardson Mailing Address 871 Peck Rd	<b>Transaction ID:</b> 10413.E7208 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City State Zip Code Hilton NY 14468-9304 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Fred Rickan Mailing Address Morgan Stanley 450 Essjay Road City State Zip Code Buffalo NY 14221- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6908 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) John Riedman Mailing Address 710 Rock Beach Rd City State Zip Code Rochester NY 14617-1321 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7209 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type

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

**3650.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Susan Robfogel	<b>Transaction ID:</b> 10413.E7210 <b>Date of Disbursement</b>
Mailing Address 9182 Luckenbach Hill Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Springwater State NY Zip Code 14560- Purpose of Disbursement Refund of Contribution srefund Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>1250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Stephen Robshaw	<b>Transaction ID:</b> 10408.E6915 <b>Date of Disbursement</b>
Mailing Address 80 Halston Pkwy	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City East Amherst State NY Zip Code 14051- Purpose of Disbursement Refund of Contribution refund Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Sr. Denise Roche	<b>Transaction ID:</b> 10408.E6916 <b>Date of Disbursement</b>
Mailing Address 320 Porter Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14201-1032 Purpose of Disbursement Refund of Contribution refund Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>300.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div>010</div> Category/ Type

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

2050.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Geoffrey Rosenberger Mailing Address 7 Lily Pond Ln	<b>Transaction ID:</b> 10413.E7273 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City Pittsford State NY Zip Code 14534-3907 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Rossi Mailing Address 71 Covent Garden Ln City Buffalo State NY Zip Code 14221-1938 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6922 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Ruch Mailing Address 1 Barstow Rd City Great Neck State NY Zip Code 11021- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7211 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

**3900.00**

**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:  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Brian Rusk

Mailing Address 340 Wellingwood Dr

City State Zip Code  
East Amherst NY 14051-1753

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6927  
Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

265.00

**B.**

Full Name (Last, First, Middle Initial)  
Arthur Russ

Mailing Address 52 Laurel Ln

City State Zip Code  
Williamsville NY 14221-8334

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6928  
Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

750.00

**C.**

Full Name (Last, First, Middle Initial)  
David Russell

Mailing Address 42 South Dr

City State Zip Code  
Buffalo NY 14226-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6929  
Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

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

1265.00

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



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

Use separate schedule(s)  
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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Donald Rust Mailing Address 6630 E Quaker St	<b>Transaction ID:</b> 10413.E7212 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Orchard Park State NY Zip Code 14127-2504 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1375.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Jay Ryan Mailing Address 4534 Klinge St NW City Washington State DC Zip Code 20016-3581 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7215 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Lawrence Ryan Mailing Address 9417 Sunnyfield Ct City Potomac State MD Zip Code 20854-2089 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6932 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

**4275.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Ryan Mailing Address 28 Hemlock Hill Rd	<b>Transaction ID:</b> 10413.E7214 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Orchard Park State NY Zip Code 14127- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Stephen Ryan Mailing Address 90 Oak Ln	<b>Transaction ID:</b> 10413.E7213 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14610-3135 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Fredrick Saia Mailing Address 274 Fairways Blvd	<b>Transaction ID:</b> 10413.E7216 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type

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

**5800.00**

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Saia	<b>Transaction ID:</b> 10413.E7217 <b>Date of Disbursement</b>
Mailing Address 458 West Delavahn Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14213-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1500.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Sands	<b>Transaction ID:</b> 10413.E7218 <b>Date of Disbursement</b>
Mailing Address 14 Elmwood Hill Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14610-3446	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>2400.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Sands	<b>Transaction ID:</b> 10413.E7219 <b>Date of Disbursement</b>
Mailing Address 4000 East Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-3739	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution REFUND Candidate Name	<div> <div>2400.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**6300.00**

**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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Robert Sansone

Mailing Address 9 New England Dr

City Rochester State NY Zip Code 14618-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7220  
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Dianna Saraf

Mailing Address 3784 Windover Dr

City Hamburg State NY Zip Code 14075-6322

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6942  
Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
William Saurer

Mailing Address 5 Marina Park South

City Buffalo State NY Zip Code 14202-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6943  
Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

500.00

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

3150.00

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Salvatore Savarino Mailing Address 65 Redwood Ter	<b>Transaction ID:</b> 10408.E6944 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-2411 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>450.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) John Sawyer Mailing Address PO Box 207 City Medina State NY Zip Code 14103- Purpose of Disbursement Refund of Contribution REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7221 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Sawyer Mailing Address PO Box 191 City Medina State NY Zip Code 14103- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6945 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

1950.00

**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  
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<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress**A.**Full Name (Last, First, Middle Initial)  
Gerald Saxe

Mailing Address 6131 Old Lake Shore Rd

City State Zip Code  
Lake View NY 14085-Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10413.E7222

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

**B.**Full Name (Last, First, Middle Initial)  
Ronald Schiavone

Mailing Address 33 Cardinal Lane

City State Zip Code  
Key Largo FL 33037-Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6112

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

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

Mailing Address 5860 Dunnigan Rd

City State Zip Code  
Lockport NY 14094-7965Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Primary 2012

Transaction ID: 10408.E6120

Date of Disbursement

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

Amount of Each Disbursement this Period

250.00

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

2750.00

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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Diana Schmidt

Mailing Address 887 Parkside Ave

City Buffalo State NY Zip Code 14216-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6122

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul Schmidt

Mailing Address 1414 Partridge Pl N

City Boynton Beach State FL Zip Code 33436-5410

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6949

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Bernard Schroeder

Mailing Address 38 Scarborough Park

City Rochester State NY Zip Code 14625-1365

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6951

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

525.00

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

975.00

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

**SCHEDULE B (FEC Form 3)  
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Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Horst Schroeder	<b>Transaction ID:</b> 10408.E6952 <b>Date of Disbursement</b>																				
Mailing Address 129 New Tudor Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	1	1												
City Pittsford State NY Zip Code 14534-4647	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution refund Candidate Name	<table border="1"> <tr> <td colspan="10">600.00</td> </tr> </table>	600.00																			
600.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<table border="1"> <tr> <td colspan="2">010</td> </tr> <tr> <td colspan="2">Category/ Type</td> </tr> </table>	010		Category/ Type																	
010																					
Category/ Type																					
<b>B.</b> Full Name (Last, First, Middle Initial) Timothy Shay	<b>Transaction ID:</b> 10408.E6968 <b>Date of Disbursement</b>																				
Mailing Address 58 Steinway Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	1	1												
City Williamsville State NY Zip Code 14221-3360	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution refund Candidate Name	<table border="1"> <tr> <td colspan="10">385.00</td> </tr> </table>	385.00																			
385.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<table border="1"> <tr> <td colspan="2">010</td> </tr> <tr> <td colspan="2">Category/ Type</td> </tr> </table>	010		Category/ Type																	
010																					
Category/ Type																					
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey Showalter	<b>Transaction ID:</b> 10413.E7224 <b>Date of Disbursement</b>																				
Mailing Address 8690 Sheridan Hill Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	1	1												
City Buffalo State NY Zip Code 14221-6322	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Refund of Contribution refund Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<table border="1"> <tr> <td colspan="2">010</td> </tr> <tr> <td colspan="2">Category/ Type</td> </tr> </table>	010		Category/ Type																	
010																					
Category/ Type																					

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

1985.00

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



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ralph Showalter Mailing Address 9625 The Maples	<b>Transaction ID:</b> 10413.E7225 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-1591 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1400.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Ralph Showalter Mailing Address 9625 The Maples	<b>Transaction ID:</b> 10413.E7271 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-1591 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Roger Showalter Mailing Address 5737 Strickler Rd	<b>Transaction ID:</b> 10413.E7223 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-1372 Purpose of Disbursement Refund of Contribution REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>3400.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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for each category of the  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ronald Shubert

Mailing Address 313 Dan Troy Drive

City Buffalo State NY Zip Code 14221-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6972

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Frank Shumway

Mailing Address 6 Bay Point Cir

City Rochester State NY Zip Code 14622-3332

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6973

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Siino

Mailing Address PO Box 654

City Orchard Park State NY Zip Code 14127-4824

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7226

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1135.00

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

1885.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) DeEtta Silvestro Mailing Address 10470 Tillman Rd	<b>Transaction ID:</b> 10413.E7256 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-2321 Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010 Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Frank Silvestro Mailing Address 10470 Tillman Rd	<b>Transaction ID:</b> 10413.E7228 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-2321 Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>1400.00</div> <div>010 Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Frank Silvestro Mailing Address 10470 Tillman Rd	<b>Transaction ID:</b> 10413.E7253 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City Clarence State NY Zip Code 14031-2321 Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010 Category/Type</div>

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

**4800.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Paul Simpson

Mailing Address 117 Rawlinson Rd

City State Zip Code  
Rochester NY 14617-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6976

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Skelly

Mailing Address 24 Dockside Lane # 436

City State Zip Code  
Key Largo FL 33037-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6981

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Teresa Small

Mailing Address 10540 Stoneway

City State Zip Code  
East Amherst NY 14031-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6982

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

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

700.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Shawn Smeallie	<b>Transaction ID:</b> 10413.E7229 <b>Date of Disbursement</b>
Mailing Address 1310 Bishop Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Alexandria State VA Zip Code 22302-3401	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div>1000.00</div>
Candidate Name	<div>010</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Joyce Smith	<b>Transaction ID:</b> 10408.E6984 <b>Date of Disbursement</b>
Mailing Address 560 Rush West Rush Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Rush State NY Zip Code 14543-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div>650.00</div>
Candidate Name	<div>010</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Timothy Smith	<b>Transaction ID:</b> 10408.E6126 <b>Date of Disbursement</b>
Mailing Address CW Baker Insurance 53 Walnut St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Lockport State NY Zip Code 14094-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund	<div>200.00</div>
Candidate Name	<div>010</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

1850.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) James Smyton Mailing Address 144 Darwin Dr	<b>Transaction ID:</b> 10408.E6128 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14226-4566 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Eric Snitzer Mailing Address 5013 Rockhaven Dr City Clarence State NY Zip Code 14031-2436 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6130 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>300.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Ronald Soluri Mailing Address 2073 West River Rd City Grand Island State NY Zip Code 14072- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6132 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

1050.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Songin	<b>Transaction ID:</b> 10413.E7230 <b>Date of Disbursement</b>
Mailing Address 4042 Foxwood Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14221-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1750.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Mimi Spangler	<b>Transaction ID:</b> 10408.E6134 <b>Date of Disbursement</b>
Mailing Address 511 Harvard Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Swarthmore State PA Zip Code 19081-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>500.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Vince Stanley	<b>Transaction ID:</b> 10413.E7231 <b>Date of Disbursement</b>
Mailing Address 11 White St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14608-1430	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1100.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**3350.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Deborah Stendardi	<b>Transaction ID:</b> 10408.E6148 <b>Date of Disbursement</b>
Mailing Address 32 Northfield Gate	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Pittsford State NY Zip Code 14534-2922	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>650.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Herbert Stephenson	<b>Transaction ID:</b> 10413.E7232 <b>Date of Disbursement</b>
Mailing Address 2010 Wheatland Center Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Scottsville State NY Zip Code 14546-9520	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1000.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Stevenson	<b>Transaction ID:</b> 10413.E7233 <b>Date of Disbursement</b>
Mailing Address 779 Washington St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14203-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1000.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**2650.00**

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



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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ari Storch</p> <p>Mailing Address Kingsbrook Partners 590 Madison Ave - Ste 701</p> <p>City New York State NY Zip Code 10028-</p> <p>Purpose of Disbursement Refund of Contribution REFUND</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10413.E7234  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1000.00</div> </p> <p><b>010</b> Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nora Sullivan</p> <p>Mailing Address 4042 Foxwood Ln</p> <p>City Williamsville State NY Zip Code 14221-7368</p> <p>Purpose of Disbursement Refund of Contribution refund</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10413.E7257  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>2400.00</div> </p> <p><b>010</b> Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Thomas Summers</p> <p>Mailing Address 13 Mourning Dove Ct</p> <p>City Orchard Park State NY Zip Code 14127-3000</p> <p>Purpose of Disbursement Refund of Contribution refund</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: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012</p>	<p><b>Transaction ID:</b> 10408.E6158  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>300.00</div> </p> <p><b>010</b> Category/Type</p>

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

**3700.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
John Sung

Mailing Address 9765 Rocky Pt

City State Zip Code  
Clarence NY 14031-1589

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6159

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
John Sutfin

Mailing Address 64 Sunset Cay Road

City State Zip Code  
Key Largo FL 33037-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10408.E6163

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Barry Swartz

Mailing Address 9774 Cobblestone Dr

City State Zip Code  
Clarence NY 14031-2443

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10413.E7235

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

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

1800.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
James Swiezy

Mailing Address 58 Lincoln Parkway

City Buffalo State NY Zip Code 14222-

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7236

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary Louise Szefer

Mailing Address 17 Country Wood Lndg

City Rochester State NY Zip Code 14626-1069

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6169

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Jon Tobin

Mailing Address 23 Fall Meadow Dr

City Pittsford State NY Zip Code 14534-9513

Purpose of Disbursement  
Refund of Contribution REFUND

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7237

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

3500.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Roger Triftshauser Mailing Address 63 Ellicott Ave	<b>Transaction ID:</b> 10413.E7238 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City State Zip Code Batavia NY 14020-2028 Purpose of Disbursement Refund of Contribution REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Donald Trump Mailing Address 230 North St - Apt C6 City State Zip Code Buffalo NY 14201- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6182 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Scott Turner Mailing Address 3455 Elmwood Ave City State Zip Code Rochester NY 14618- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7239 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1900.00</div> <div>010</div> Category/ Type

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

**3400.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Ulrich Mailing Address 45 Main St	<b>Transaction ID:</b> 10413.E7240 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Lockport State NY Zip Code 14094-2838 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Vanner Mailing Address 11 Pinchot Ct Ste 100 City Amherst State NY Zip Code 14228-1193 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6193 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Sally Vastola Mailing Address 27 Collins Ct. City Getzville State NY Zip Code 14068- Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10413.E7241 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>010</div> Category/ Type

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

**3900.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Vincent Versage Mailing Address 211 Duke St	<b>Transaction ID:</b> 10408.E6194 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Alexandria State VA Zip Code 22314-3805 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Peter Vito Mailing Address 461 Linwood Ave City Buffalo State NY Zip Code 14209-1630 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6197 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>010</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Carole Vukelic Mailing Address 55 Troon Rd City East Aurora State NY Zip Code 14052-9424 Purpose of Disbursement Refund of Contribution refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<b>Transaction ID:</b> 10408.E6200 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>010</div> Category/ Type

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

1250.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Eugene Vukelic

Mailing Address 55 Troon Rd

City State Zip Code  
East Aurora NY 14052-9424

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7243

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1900.00

**B.**

Full Name (Last, First, Middle Initial)  
Peter Vukelic

Mailing Address 132 Lakefront Blvd Apt 605

City State Zip Code  
Buffalo NY 14202-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7242

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
James Wadsworth

Mailing Address 166 Bryant St

City State Zip Code  
Buffalo NY 14222-2003

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7244

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2000.00

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

4900.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
John N. Walsh

Mailing Address 101 Lexington Ave

City Buffalo State NY Zip Code 14222-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6202

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
William Walsh

Mailing Address 104 Chicago Blvd.

City Sea Girt State NJ Zip Code 08750-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10413.E7245

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Raymond Walter

Mailing Address 209 San Fernando Ln

City East Amherst State NY Zip Code 14051-2250

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

Transaction ID: 10408.E6204

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

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

1750.00

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



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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Robert Waters

Mailing Address 11003 W Center St Ext

City State Zip Code  
Medina NY 14103-9557

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6210  
Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert Weber

Mailing Address 5880 Midnight Pass Rd Apt 602

City State Zip Code  
Sarasota FL 34242-4108

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6215  
Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Philip Wegman

Mailing Address 130 Hogan Point Rd

City State Zip Code  
Hilton NY 14468-8917

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7247  
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

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

1450.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Brooke Weisleder	<b>Transaction ID:</b> 10413.E7248 <b>Date of Disbursement</b>
Mailing Address 53 Tarpon Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Key Largo State FL Zip Code 33037- Purpose of Disbursement Refund of Contribution refund Candidate Name	Amount of Each Disbursement this Period <div>2250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div> <div>010</div> <div>Category/Type</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Earl Wells	<b>Transaction ID:</b> 10413.E7182 <b>Date of Disbursement</b>
Mailing Address 6420 Heise Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Clarence Center State NY Zip Code 14032- Purpose of Disbursement Refund of Contribution refund Candidate Name	Amount of Each Disbursement this Period <div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div> <div>010</div> <div>Category/Type</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Douglas Westerdahl	<b>Transaction ID:</b> 10408.E6222 <b>Date of Disbursement</b>
Mailing Address 470 Basket Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Webster State NY Zip Code 14580-9754 Purpose of Disbursement Refund of Contribution refund Candidate Name	Amount of Each Disbursement this Period <div>250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	<div> <div>010</div> <div>Category/Type</div> </div>

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

**3500.00**

**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  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Western NY Urology Associates

Mailing Address Joseph Greco  
3085 Harlen Rd - Ste 200

City Buffalo State NY Zip Code 14225-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10415.E7309

Date of Disbursement

03 / 31 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Donald White

Mailing Address 335 Renaissance Dr

City Williamsville State NY Zip Code 14221-1973

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7183

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2400.00

**C.**

Full Name (Last, First, Middle Initial)  
William White II M.D.

Mailing Address 8 Simmons Rd

City Perry State NY Zip Code 14530-9535

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10408.E6224

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

200.00

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

3600.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Bruce Williams	<b>Transaction ID:</b> 10408.E6227
	Mailing Address 9537 Somerset Dr	Date of Disbursement <div> <div>03</div> <div>11</div> <div>2011</div> </div>
	City Barker State NY Zip Code 14012-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010</div> <div>Category/ Type</div>	<div>250.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	
<b>B.</b>	Full Name (Last, First, Middle Initial) Jon Williams	<b>Transaction ID:</b> 10413.E7184
	Mailing Address 36 Audubon Dr	Date of Disbursement <div> <div>03</div> <div>04</div> <div>2011</div> </div>
	City Buffalo State NY Zip Code 14226-4042	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010</div> <div>Category/ Type</div>	<div>1000.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	
<b>C.</b>	Full Name (Last, First, Middle Initial) Timothy Wilmot	<b>Transaction ID:</b> 10413.E7272
	Mailing Address 135 Taylor Rd	Date of Disbursement <div> <div>03</div> <div>09</div> <div>2011</div> </div>
	City Honeoye Falls State NY Zip Code 14472-9732	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Refund of Contribution refund</div> <div>Candidate Name</div> </div> <div>010</div> <div>Category/ Type</div>	<div>2400.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</div> <div>State: District: Primary 2012</div> </div>	

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

**3650.00**

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Richard Winter

Mailing Address Richardson Management  
295 Main St - Suite 947

City Buffalo State NY Zip Code 14203-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6988

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)  
Wayne Wisbaum

Mailing Address 180 Greenaway Rd

City Buffalo State NY Zip Code 14226-4166

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10408.E6989

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

750.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Witmer

Mailing Address 892 Lake Rd

City Webster State NY Zip Code 14580-9008

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7185

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

2500.00

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

3525.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Wolf	<b>Transaction ID:</b> 10408.E6995 <b>Date of Disbursement</b>
Mailing Address 16 Whitecliff Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Pittsford State NY Zip Code 14534-2928	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>250.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Frederick Wolf	<b>Transaction ID:</b> 10413.E7186 <b>Date of Disbursement</b>
Mailing Address 775 Chestnut Hill Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City East Aurora State NY Zip Code 14052-2603	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>1250.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Kristen Wolf	<b>Transaction ID:</b> 10408.E6996 <b>Date of Disbursement</b>
Mailing Address 73 Wildwood Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Orchard Park State NY Zip Code 14127-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div> <div>250.00</div> <div>010 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

1750.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Elaine Wolfe	<b>Transaction ID:</b> 10408.E6997 <b>Date of Disbursement</b>
Mailing Address 10110 Greiner Rd	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 11 / 2011</div> </div>
City State Zip Code Clarence NY 14031-1375	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>670.00</div> <div>010 Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Lee Wortham	<b>Transaction ID:</b> 10413.E7187 <b>Date of Disbursement</b>
Mailing Address 5959 Donegal Manor	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 04 / 2011</div> </div>
City State Zip Code Clarence Center NY 14032-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>1000.00</div> <div>010 Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Claude H. Wright	<b>Transaction ID:</b> 10413.E7188 <b>Date of Disbursement</b>
Mailing Address 1 Knowlton Ln	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 04 / 2011</div> </div>
City State Zip Code Rochester NY 14618-3701	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name	<div>2400.00</div> <div>010 Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

4070.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Joan Yang	<b>Transaction ID:</b> 10413.E7189 <b>Date of Disbursement</b>
Mailing Address 18 Tracy St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14201-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Yates	<b>Transaction ID:</b> 10413.E7190 <b>Date of Disbursement</b>
Mailing Address 5 Pickwick Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Rochester State NY Zip Code 14618-4103	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1325.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	
<b>C.</b> Full Name (Last, First, Middle Initial) Won Yi	<b>Transaction ID:</b> 10413.E7191 <b>Date of Disbursement</b>
Mailing Address 6425 Landstone Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div>
City Clarence Center State NY Zip Code 14032-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div>	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012	

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

**3325.00**

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



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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
H.I. Yoh

Mailing Address 22 Channel Cay Rd

City State Zip Code  
Key Largo FL 33037-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10228.E6090

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 0 2 / 1 8 / 2 0 1 1

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Craig Yunker

Mailing Address 6460 Transit Rd

City State Zip Code  
Elba NY 14058-9706

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7192

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 0 3 / 0 4 / 2 0 1 1

Amount of Each Disbursement this Period

1150.00

**C.**

Full Name (Last, First, Middle Initial)  
John Yurtchuk

Mailing Address 27 S Woodside Lane

City State Zip Code  
Buffalo NY 14221-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Primary 2012

**Transaction ID:** 10413.E7193

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 0 3 / 0 4 / 2 0 1 1

Amount of Each Disbursement this Period

1500.00

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

2900.00

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

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

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NAME OF COMMITTEE (In Full)

Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)

Laura Zaepfel

Mailing Address 4660 Greenbriar Rd

City Buffalo State NY Zip Code 14221-6236

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7249

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1275.00

**B.**

Full Name (Last, First, Middle Initial)

David Zebro

Mailing Address 169 Halston Pkwy

City East Amherst State NY Zip Code 14051-1891

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7250

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Howard Zemsky

Mailing Address 181 Morris Ave

City Buffalo State NY Zip Code 14214-1609

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

Transaction ID: 10413.E7251

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1000.00

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

3275.00

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

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

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) John Zick Mailing Address 621 W Lyon Farm Dr	<b>Transaction ID:</b> 10408.E7011 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div>
City Greenwich State CT Zip Code 06831-4365 Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Primary 2012	<b>Amount of Each Disbursement this Period</b> <div>250.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Anthony Zola Mailing Address PO Box 42, Thanyaburi Pathum Thani 12110, Thailand City State Zip Code Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Primary 2012	<b>Transaction ID:</b> 10408.E7012 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Daniel Zuzunaga Mailing Address 200 E 16th Street, Apt 8GH City New York State NY Zip Code 10003- Purpose of Disbursement Refund of Contribution refund Candidate Name <div> <div>010</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Primary 2012	<b>Transaction ID:</b> 10413.E7252 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div>

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

2900.00

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

472315.00

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☒ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Chris Lee for Congress

**A.**

Full Name (Last, First, Middle Initial)  
National Fuel Gas Federal PAC

Mailing Address Mr. Michael Rose  
6363 Main St

City Buffalo State NY Zip Code 14221-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10228.E6083

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 02 / 18 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Price WaterhouseCoopers PAC

Mailing Address Laura Cox Kaplan  
1301 K Street, NW Ste 800 W

City Washington State DC Zip Code 20005-

Purpose of Disbursement  
Refund of Contribution refund

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Primary 2012

**Transaction ID:** 10228.E6082

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 02 / 18 / 2011

Amount of Each Disbursement this Period

2500.00

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

3500.00

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

3500.00

**SCHEDULE C (FEC Form 3)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
Chris Lee for Congress

Transaction ID: LS81027.C29464

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Christopher Lee - [PERSONAL FUNDS]

Election:

☐ Primary  
☒ General  
☐ Other (specify) ▼

Mailing Address 48 Bradenham Place

City Buffalo State NY ZIP Code 14226-

Original Amount of Loan

1100000.00

Cumulative Payment To Date

1100000.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M  
0 6D D  
2 7Y Y Y Y  
2 0 0 8

Date Due

ONDEMAND

Interest Rate

5.00

% (apr)

Secured:

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)  
Christopher LeeName of Employer  
SelfMailing Address  
48 Bradenham PlaceOccupation  
candidate

City Buffalo State NY ZIP Code 14226-

Amount  
Guaranteed  
Outstanding:

0.00

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

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

0.00

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