

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

Doheny for Congress

ADDRESS (number and street) 107 Court Street

PO Box 257

Check if different than previously reported. (ACC)

Watertown NY 13601

2. **FEC IDENTIFICATION NUMBER** C00462853

CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NY 23

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 04 01 2010 through 06 30 2010

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 Jeffrey Kirkby

Signature of Treasurer Electronically Filed by Jeffrey Kirkby Date 01 06 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							
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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 123

Write or Type Committee Name

Doheny for Congress

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	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)).....	151556.00	813551.00
(b) Total Contribution Refunds (from Line 20(d)).....	14600.00	300800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	136956.00	512751.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	364156.86	576737.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	5191.36	5191.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	358965.50	571546.55
8. Cash on Hand at Close of Reporting Period (from Line 27).....	691205.45	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	750000.00	

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)

Write or Type Committee Name
Doheny for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

147373.00

806523.00

(ii) Unitemized.....

4084.00

6829.00

(iii) TOTAL of contributions

151457.00

813352.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

99.00

199.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

151556.00

813551.00

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

0.00

0.00

13. LOANS

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

100000.00

750000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

100000.00

750000.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

5191.36

5191.36

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

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

256747.36

1568742.36

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	364156.86	576737.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	14600.00	300800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	14600.00	300800.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	378756.86	877537.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	813214.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	256747.36
25. SUBTOTAL (add Line 23 and Line 24).....	1069962.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	378756.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	691205.45

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Dr. Shantanu Agrawal</p> <p>Mailing Address 100 Cliff Drive Apt 22</p> <p>City Laguna Beach State CA Zip Code 92651</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Alexandria Hospital Occupation Doctor</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 300.00</p>	<p>Date of Receipt 05 / 06 / 2010</p> <p>Transaction ID: SA11AI.5087</p> <p>Amount of Each Receipt this Period 300.00</p> <p>Contribution - Primary</p>
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<p>B. Full Name (Last, First, Middle Initial) Dr. Shantanu Agrawal</p> <p>Mailing Address 100 Cliff Drive Apt 22</p> <p>City Laguna Beach State CA Zip Code 92651</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Alexandria Hospital Occupation Doctor</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 600.00</p>	<p>Date of Receipt 06 / 16 / 2010</p> <p>Transaction ID: SA11AI.5286</p> <p>Amount of Each Receipt this Period 300.00</p> <p>Contribution - Primary</p>
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<p>C. Full Name (Last, First, Middle Initial) Mr. Paul G Alfonso</p> <p>Mailing Address 12 Meredith Street</p> <p>City West Roxbury State MA Zip Code 02132</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Brown Rudnick Occupation Attorney</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 06 / 30 / 2010</p> <p>Transaction ID: SA11AI.5711</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Contribution - Primary</p>
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SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 6 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Ms Jennifer A Banazek

Mailing Address 21394 Fox Ridge Road

City State Zip Code
Watertown NY 13601

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	1	0

Transaction ID: SA11AI.5138

Amount of Each Receipt this Period
250.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Marti Barash

Mailing Address 1555 Club View Drive

City State Zip Code
Los Angeles CA 90024

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

Name of Employer Occupation
Klee Tuchuin Bogdanoff & Stern Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5756

Amount of Each Receipt this Period
1000.00

Contribution - Primary

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

Mailing Address 116 Central Park South
Apt 7c

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
I-Bankers Banker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.5282

Amount of Each Receipt this Period
500.00

Contribution - Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 123
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Ron Bendin

Mailing Address 4630 Noeline Avenue

City Encino State CA Zip Code 91436

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

Name of Employer Healthcare Management Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.5760
Amount of Each Receipt this Period 1000.00
Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Jeffrey Bersh

Mailing Address 27 N Moore Street
10d

City New York State NY Zip Code 10013

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

Name of Employer Venor Occupation trader

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 06 / 22 / 2010
Transaction ID: SA11AI.5300
Amount of Each Receipt this Period 2400.00
Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Lee R Bogdanoff

Mailing Address 1614 Bryn Mawr Avenue

City Santa Monica State CA Zip Code 90405-5835

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

Name of Employer Klee, Tuchin, Bogdanoff & Ster Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.5692
Amount of Each Receipt this Period 2000.00
Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► 5400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

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

Mailing Address 111 Garden Road

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Longacker Fund Management Managing Principal
LLC

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5661

Amount of Each Receipt this Period
750.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Daniel J Bussel

Mailing Address 3933 Ethel Avenue

City State Zip Code
Studio City CA 91604-2204

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Klee, Tuchin, Boddanoff Attorney
& Ster

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5694

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Joseph M Butler, Jr.

Mailing Address 335 Teneyck Street

City State Zip Code
Watertown NY 13601-3930

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Community Bank Banking Officer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5653

Amount of Each Receipt this Period
250.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) 2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 123
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. David Canham, IV

Mailing Address 1210 R Street NW
#110

City State Zip Code
Washington DC 20009

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

Name of Employer Occupation
Investmant Management Inc Investor - Managing Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 19 / 2010

Transaction ID: SA11AI.5287

Amount of Each Receipt this Period
500.00

Contribution - Primary

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

Mailing Address 5 East 22nd Street
Apt 9F

City State Zip Code
New York NY 10010

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

Name of Employer Occupation
Venor Capital Financial Analyst

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5732

Amount of Each Receipt this Period
500.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Dev Chodry

Mailing Address 219 West 81st Street

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Old Bell Associates Hedge Fund Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 21 / 2010

Transaction ID: SA11AI.5315

Amount of Each Receipt this Period
1000.00

Contribution - Primary

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

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

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

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

FOR LINE NUMBER: PAGE 10 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Anthony G Collins

Mailing Address 59 Clarkson Ave

City State Zip Code
Potsdam NY 13676

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

Name of Employer Occupation
Clarkson University President of University

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.5136

Amount of Each Receipt this Period
250.00

Contribution - Primary

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

Mailing Address 2046A Jefferson Street

City State Zip Code
San Francisco CA 94123

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

Name of Employer Occupation
Pricewaterhousecoopers Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.5321

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. John P Cronin, III

Mailing Address 37931 NYS Rt 12E

City State Zip Code
Clayton NY 13624

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.5581

Amount of Each Receipt this Period
125.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **1375.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 123

(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)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
CROWE PAC

Mailing Address 3815 River Crossing Parkway
Ste 300

City State Zip Code
Indianapolis IN 46240

FEC ID number of contributing federal political committee. **C** C00451518

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5696

Amount of Each Receipt this Period

1000.00

Contribution - Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Dennis D Curtin

Mailing Address 22 Spit Fire Drive

City State Zip Code
Plattsburgh NY 12901-8521

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

Name of Employer Occupation
Octopharmplasma Healthcare

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5593

Amount of Each Receipt this Period

1000.00

Contribution - Primary

C.

Full Name (Last, First, Middle Initial)
Mr. Ronn S Davids

Mailing Address 3069 Patricia Avenue

City State Zip Code
Los Angeles CA 90064

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

Name of Employer Occupation
Klee, Tuchin, Bogdanoff & Ster Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5698

Amount of Each Receipt this Period

1000.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ►

3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Ms Christine Hesse Deloach

Mailing Address 12315 Blair Ridge Road

City State Zip Code
Fairfax VA 22033

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

Name of Employer Occupation
Akin Gump Lobbyist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.5554

Amount of Each Receipt this Period
250.00

Contribution - Primary

B.

Full Name (Last, First, Middle Initial)
Ms Jennifer Dinkleman

Mailing Address 100 South Wetherly Drive #2

City State Zip Code
Los Angeles CA 90048

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

Name of Employer Occupation
Klee Tuchin Bogdan off & Stern Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5758

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C.

Full Name (Last, First, Middle Initial)
Mr. Todd Doldo

Mailing Address 747 Ball Avenue

City State Zip Code
Watertown NY 13601

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

Name of Employer Occupation
Self Employed Lawyer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	1	0

Transaction ID: SA11AI.5132

Amount of Each Receipt this Period
250.00

Contribution - Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. James Durand
 Mailing Address Box 41 45302 Street Rt 12
 City Alexandria Bay State NY Zip Code 13607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-employed Occupation Motel Owner
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt 06 / 08 / 2010
Transaction ID: SA11AI.5657
 Amount of Each Receipt this Period 250.00
 Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Scott Eisner
 Mailing Address 18706 Hillsboro Road
 City North Ridge State CA Zip Code 91326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Block, Plank, Eisner, Florida Occupation CPA
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.5762
 Amount of Each Receipt this Period 1000.00
 Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Zachary Esposito
 Mailing Address 546 Highland Avenue
 City Ridgewood State NJ Zip Code 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Michigan Occupation Student
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
 Date of Receipt 06 / 25 / 2010
Transaction ID: SA11AI.5548
 Amount of Each Receipt this Period 2400.00
 Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► 3650.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Zachary Esposito

Mailing Address 546 Highland Avenue

City State Zip Code
Ridgewood NJ 07450

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

Name of Employer Occupation
University of Michigan Student

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.5551

Amount of Each Receipt this Period
2400.00

Contribution - General

4800.00

B.

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

Mailing Address 656 Forest Avenue

City State Zip Code
Larchmont NY 10538

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

Name of Employer Occupation
Gibson, Dunn Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.5546

Amount of Each Receipt this Period
2400.00

Contribution - Primary

2400.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert D Ferris

Mailing Address 22736 Tall Timber Trail

City State Zip Code
Watertown NY 13601

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

Name of Employer Occupation
Big Apple Music Music - Business Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.5273

Amount of Each Receipt this Period
250.00

Contribution - Primary

250.00

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert D Ferris

Mailing Address 22736 Tall Timber Trail

City State Zip Code
Watertown NY 13601

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

Name of Employer Occupation
Big Apple Music Music - Business Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	8	/	2	0	1	0

Transaction ID: SA11AI.5643

Amount of Each Receipt this Period
50.00

Contribution - Primary

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

Mailing Address 10478 Wilkins Avenue

City State Zip Code
Los Angeles CA 90024

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

Name of Employer Occupation
Klee Tuchin Bogdanoff & Stern Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5764

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. James P Finn

Mailing Address 26 Hawthorne Road

City State Zip Code
Red Bank NJ 07701

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

Name of Employer Occupation
Credit Sights Sales in Credit Research

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.5574

Amount of Each Receipt this Period
250.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Evan Flaschen		Date of Receipt MM / DD / YYYY 06 / 22 / 2010		
	Mailing Address 242 Hubbard Street		Transaction ID: SA11AI.5304		
	City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 2400.00	
	FEC ID number of contributing federal political committee. C		Contribution - Primary		
	Name of Employer Bracewell & Giuliani LLP	Occupation Lawyer	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) Mr. Evan Flaschen		Date of Receipt MM / DD / YYYY 06 / 22 / 2010		
	Mailing Address 242 Hubbard Street		Transaction ID: SA11AI.6037		
	City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 2400.00	
	FEC ID number of contributing federal political committee. C		Contribution - General		
	Name of Employer Bracewell & Giuliani LLP	Occupation Lawyer	Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) Mr. Anthony Foti		Date of Receipt MM / DD / YYYY 06 / 24 / 2010		
	Mailing Address 181 Bellow Ave		Transaction ID: SA11AI.5589		
	City Watertown	State NY	Zip Code 13601	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		Contribution - Primary		
	Name of Employer Akin Gump	Occupation Senior Public Policy Advisor	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	5800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Avram Friedman

Mailing Address 845 West End Avenue
Apt. 15E

City State Zip Code
New York NY 10025

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

Name of Employer Occupation
KasowitzBersonTorresFriedman Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.5106

Amount of Each Receipt this Period
2400.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. John P Gaus

Mailing Address 26035 E Gotham Road

City State Zip Code
Watertown NY 13601-5779

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

Name of Employer Occupation
Self Employed Entrepreneur

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.5124

Amount of Each Receipt this Period
2400.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Peter Gilhuly

Mailing Address 671 Latimer Road

City State Zip Code
Santa Monica CA 90402

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

Name of Employer Occupation
Latham & Watkins Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5733

Amount of Each Receipt this Period
500.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **5300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Philip Giordano

Mailing Address 2392 Hawthorne Drive

City State Zip Code
Yorktown Heights NY 10598

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

Name of Employer Deutsche Bank Occupation Analyst

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.5294

Amount of Each Receipt this Period
2400.00

Contribution - Primary

B.

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

Mailing Address 906 Chautauqua Blvd

City State Zip Code
Pacific Palisades CA 90272

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

Name of Employer Greenburg, Traurig Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5748

Amount of Each Receipt this Period
500.00

Contribution - Primary

C.

Full Name (Last, First, Middle Initial)
Mr. Jared Merril Golub

Mailing Address 24 Overhill Avenue

City State Zip Code
Rye NY 10580

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

Name of Employer Marblegate Asset Management Occupation Investor - Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.5572

Amount of Each Receipt this Period
750.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **3650.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 123

(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

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

Mailing Address 24697 Perch Lake Road

City State Zip Code
Watertown NY 13601

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

Name of Employer Occupation
Goodwin's Contracting Business Owner - Contractor

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.5128

Amount of Each Receipt this Period

250.00

Contribution - Primary

B.

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

Mailing Address 100 Ardsley Road

City State Zip Code
Scardale NY 10583

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

Name of Employer Occupation
Gibson, Dunn & Crutcher Attorney

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.5325

Amount of Each Receipt this Period

1000.00

Contribution - Primary

C.

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

Mailing Address 140 Riverside Blvd
Apt 324

City State Zip Code
New York NY 10069

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

Name of Employer Occupation
Houlihan Lokey Investment Banker

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

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

Transaction ID: SA11AI.5323

Amount of Each Receipt this Period

2400.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ►

3650.00

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. William Hardie

Mailing Address 245 Park Avenue
20th Floor

City State Zip Code
New York NY 10167

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

Name of Employer Occupation
Houlihan Lokey Investment Banker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.5295

Amount of Each Receipt this Period
2400.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Jonathan Harris

Mailing Address 200 East 71st Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Alternative Investment Mn- gt Investments

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5743

Amount of Each Receipt this Period
2000.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Matthew Hirschfield

Mailing Address 66 Spring Court

City State Zip Code
Muttontown NY 11791

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

Name of Employer Occupation
Merrill Lynch Lawyer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	8	/	2	0	1	0

Transaction ID: SA11AI.5660

Amount of Each Receipt this Period
1000.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **5400.00**

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Vladimir Jelisavcic

Mailing Address 516 E 78th Street
Apt 1 JK

City State Zip Code
New York NY 10075-1109

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

Name of Employer Occupation
Longacre Capital Investments - Managing Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.5096

Amount of Each Receipt this Period
999.00

Contribution - Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas Jermiassen

Mailing Address 5843 Ridgebrook Drive

City State Zip Code
Agoura Hills CA 91301

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

Name of Employer Occupation
LECG CPA

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5766

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C.

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

Mailing Address 1380 West Lexington Street

City State Zip Code
Washington UT 84780

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

Name of Employer Occupation
LECG CPA

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5768

Amount of Each Receipt this Period
1000.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **2999.00**

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gavin Sean Kagan

Mailing Address 200 E 61st Street
Apt 31A

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Houlihan Lokey Investor - Managing Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.5556

Amount of Each Receipt this Period
750.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Matthew Kelsey

Mailing Address 515 8th Street
Apt 3

City State Zip Code
Brooklyn NY 11215

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

Name of Employer Occupation
Gison, Dunn & Crutcher Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.5544

Amount of Each Receipt this Period
500.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Ira Kharasch

Mailing Address 10100 Santa Monica Blvd

City State Zip Code
Los Angeles CA 90067

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

Name of Employer Occupation
Pachulski, Stang, Ziehl, Jones Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5770

Amount of Each Receipt this Period
1000.00

Contribution - Primary

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

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gideon King

Mailing Address 430 East 86th Street

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Loeb Capital Business

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.5302

Amount of Each Receipt this Period
999.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Kenneth N Klee

Mailing Address 13041 Evanston Street

City State Zip Code
Los Angeles CA 90049-3607

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

Name of Employer Occupation
UCLA Professor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5700

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Charles F Lamon

Mailing Address P.O. Box 362

City State Zip Code
Dexter NY 13634

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

Name of Employer Occupation
Victory Promotions Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5720

Amount of Each Receipt this Period
500.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **2499.00**

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Stephen R Lane

Mailing Address 624 Orchard Street
P.O. Box 442

City Dexter State NY Zip Code 13634-0442

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

Name of Employer General Brown School District Occupation Teacher

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 08 / 2010
Transaction ID: SA11AI.5631
 Amount of Each Receipt this Period 450.00
 Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Marc Lehmann

Mailing Address 215 West 95th Street

City New York State NY Zip Code 10025

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

Name of Employer Jana Partners Occupation Analyst

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 06 / 23 / 2010
Transaction ID: SA11AI.5318
 Amount of Each Receipt this Period 2400.00
 Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Marc Lehmann

Mailing Address 215 West 95th Street

City New York State NY Zip Code 10025

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

Name of Employer Jana Partners Occupation Analyst

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 06 / 23 / 2010
Transaction ID: SA11AI.5320
 Amount of Each Receipt this Period 2400.00
 Contribution - General

SUBTOTAL of Receipts This Page (optional) ► 5250.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Alyse Levin

Mailing Address 250 Meadowview Avenue

City State Zip Code
Hewlett Bay Park NY 11557

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

Name of Employer Occupation
Certified Mortgage, Inc Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 22 / 2010

Transaction ID: SA11AI.5311

Amount of Each Receipt this Period
1000.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Daniel Lewis

Mailing Address 150 Columbus Avenue
21D

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Orange Capital, LLC Finance

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 21 / 2010

Transaction ID: SA11AI.5313

Amount of Each Receipt this Period
500.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Allen Lopus

Mailing Address 402 Greyhawk Circle

City State Zip Code
Venetia PA 15367

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

Name of Employer Occupation
Thorp, Reed & Armstrong Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5735

Amount of Each Receipt this Period
750.00

Contribution - Primary

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

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

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

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

FOR LINE NUMBER: PAGE 26 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. David O'B Martin

Mailing Address 766 Nimitz Lane

City State Zip Code
Hedgesville WV 25427

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

Name of Employer Occupation
Martin Fisher Thompson & Associates, LLC Lobbyist - President of Firm

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 24 / 2010

Transaction ID: SA11AI.5558

Amount of Each Receipt this Period
500.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. James C McCarroll

Mailing Address 599 Lexington Avenue

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Reed Smith LLP Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5596

Amount of Each Receipt this Period
2400.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mrs. Jennifer A McCarroll

Mailing Address 599 Lexington Avenue

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
homemaker homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5597

Amount of Each Receipt this Period
2400.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **5300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Christopher C McGrath, III

Mailing Address 11 Seneca Street

City State Zip Code
Rye NY 10580-1723

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

Name of Employer Occupation
McGrath & Cannavo PC Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 24 / 2010

Transaction ID: SA11AI.5583

Amount of Each Receipt this Period
500.00

Contribution - Primary

B.

Full Name (Last, First, Middle Initial)
Ms Jacki McIntyre

Mailing Address 3100 Granville Avenue

City State Zip Code
Compton CA 90066

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

Name of Employer Occupation
Homemaker homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5774

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C.

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

Mailing Address 22 River Terrace
27H

City State Zip Code
New York NY 10202

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

Name of Employer Occupation
Willkie Farr & Gallagher Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 24 / 2010

Transaction ID: SA11AI.5579

Amount of Each Receipt this Period
1000.00

Contribution - Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
David Mirabito

Mailing Address 679 Forest Avenue

City State Zip Code
Fulton NY 13069

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

Name of Employer Metlife Occupation Financial Planner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5662

Amount of Each Receipt this Period
250.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Michael A Morgia

Mailing Address 325 Flower Avenue West

City State Zip Code
Watertown NY 13601

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

Name of Employer Morgan Stanley Smith Barney Occupation Financial - Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5648

Amount of Each Receipt this Period
500.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Richard W Morgner, Jr.

Mailing Address 707 Forest Avenue

City State Zip Code
Rye NY 10580-3261

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

Name of Employer Jeffers & Co Occupation Managing Directory

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5718

Amount of Each Receipt this Period
1000.00

Contribution - Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 123

(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)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. R Todd Neilson

Mailing Address 1251 E Mansfield Way

City State Zip Code
Draper UT 84020

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

Name of Employer Occupation
Neilson Elggren LLP forensic and investigative accounting

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5702

Amount of Each Receipt this Period

2000.00

Contribution - Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Craig Osborne

Mailing Address 2030 Paddock Lane

City State Zip Code
Norco CA 92860

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

Name of Employer Occupation
Legal Vision Consulting Group Document Mgt - Entrepreneur

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5704

Amount of Each Receipt this Period

1000.00

Contribution - Primary

C.

Full Name (Last, First, Middle Initial)
Mrs. Dana Pachulski

Mailing Address 100 Copa de Oro Drive

City State Zip Code
Los Angeles CA 90077

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5753

Amount of Each Receipt this Period

2400.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ▶

5400.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Dana Pachulski

Mailing Address 100 Copa de Oro Drive

City State Zip Code
Los Angeles CA 90077

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.5755

Amount of Each Receipt this Period
2400.00

Contribution - General

4800.00

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

Mailing Address 613 North Maple Drive

City State Zip Code
Beverly Hills CA 90212

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

Name of Employer Occupation
Stutman, Triesta & Gratt Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.5775

Amount of Each Receipt this Period
1000.00

Contribution - Primary

1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard Pachulski

Mailing Address 100 Coa de Oro Drive

City State Zip Code
Los Angeles CA 90077

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

Name of Employer Occupation
Pachulski Stang Ziehl & Jones Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.5750

Amount of Each Receipt this Period
2400.00

Contribution - Primary

2400.00

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Richard Pachulski

Mailing Address 100 Coa de Oro Drive

City State Zip Code
Los Angeles CA 90077

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

Name of Employer: Pachulski Stang Ziehl & Jones
Occupation: Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4800.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: SA11AI.5752
 Amount of Each Receipt this Period: 2400.00
 Contribution - General

B. Full Name (Last, First, Middle Initial)
Mr. Thomas E Patterson

Mailing Address 239 South Van Ness Avenue

City State Zip Code
Los Angeles CA 90004-3920

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

Name of Employer: Klee Tuchin Bogdanoff & Stern
Occupation: Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: SA11AI.5707
 Amount of Each Receipt this Period: 1000.00
 Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Gordon R Penman

Mailing Address P.O. Box 425

City State Zip Code
Mansfield MA 02048

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

Name of Employer: Brown Rudnick
Occupation: Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: SA11AI.5709
 Amount of Each Receipt this Period: 250.00
 Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **3650.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Jason Pomerantz

Mailing Address 3975 Prado Del Trigo

City State Zip Code
Calabasas CA 91302-3017

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

Name of Employer Occupation
Pachulski Stang Ziehl & Jones Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5684

Amount of Each Receipt this Period
500.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Scott W Reed

Mailing Address 1215 19th Street 3rd Floor

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation
Chesapeake Enterprises Lobbyist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5599

Amount of Each Receipt this Period
500.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. David A Renzi

Mailing Address 23672 County Route 67

City State Zip Code
Watertown NY 13601-9360

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

Name of Employer Occupation
Self-employed Lawyer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.5118

Amount of Each Receipt this Period
1000.00

Contribution - Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

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

Mailing Address PO Box 6624

City State Zip Code
Watertown NY 13601

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

Name of Employer Occupation
Renzi Brothers Food Distribution - Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	1	0

Transaction ID: SA11AI.5121

Amount of Each Receipt this Period
250.00

Contribution - Primary

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

Mailing Address 17 Meadow Way

City State Zip Code
Irvington NY 10533

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

Name of Employer Occupation
Kasowitz Benson Torres & Fried Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5746

Amount of Each Receipt this Period
1800.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Michael G Rossetti

Mailing Address 6611 Dearborn Drive

City State Zip Code
Falls Church VA 22044

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

Name of Employer Occupation
Akin Gump Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.5560

Amount of Each Receipt this Period
250.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **2300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Abraham Stuart Rubin

Mailing Address 715 North Alpine Drive

City State Zip Code
Beverly Hills CA 90210

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

Name of Employer Occupation
Adelman & Rubin PC Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5686

Amount of Each Receipt this Period
1000.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Dr. Jacob Rubin

Mailing Address 801 N Foothill Road

City State Zip Code
Beverly Hills CA 90212

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

Name of Employer Occupation
Self-employed Healthcare - Doctor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5777

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Ryan

Mailing Address 76 Robin Road

City State Zip Code
Weston MA 02493

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

Name of Employer Occupation
Brown Rudnick LLP Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.5737

Amount of Each Receipt this Period
1000.00

Contribution - Primary

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 123
	(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)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Bob S Safai	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 12121 Wilshire Boulevard Suite 959	Transaction ID: SA11AI.5688
	City State Zip Code Los Angeles CA 90025	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution - Primary
	Name of Employer Occupation Madison Partners Commercial Real Estate - Realtor Owner	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Eric T Schwartz	Date of Receipt MM / DD / YYYY 05 / 26 / 2010
	Mailing Address PO Box 621	Transaction ID: SA11AI.5103
	City State Zip Code Sackets Harbor NY 13685	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution - Primary
	Name of Employer Occupation Self Employed Lawyer	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Michael Scott	Date of Receipt MM / DD / YYYY 06 / 22 / 2010
	Mailing Address 255 Hudson Street	Transaction ID: SA11AI.5299
	City State Zip Code New York NY 10013	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution - Primary
	Name of Employer Occupation Venor Capital Analyst	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Aadel Shaaban

Mailing Address 1 Fernwood Avenue

City State Zip Code
Rye NY 10580

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

Name of Employer Occupation
Cerulean Capital Mgt Investment Management

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5728

Amount of Each Receipt this Period
500.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Jonathon Shenson

Mailing Address 5226 Atoll Avenue

City State Zip Code
Sherman Oaks CA 91401

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

Name of Employer Occupation
Klee Tuchin Bogdanoff & Stern Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5779

Amount of Each Receipt this Period
1000.00

Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Steven Shoemate

Mailing Address 50 Bond Street # 6

City State Zip Code
New York NY 10012

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

Name of Employer Occupation
Gibson, Dunn & Crutcher Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5730

Amount of Each Receipt this Period
2000.00

Contribution - Primary

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

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 123

(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Glenn Siegel

Mailing Address 1095 Sixth Avenue

City State Zip Code
New York NY 10036

FEC ID number of contributing federal political committee.

C

Name of Employer
Dechert LLP

Occupation
Lawyer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.5726

Amount of Each Receipt this Period

250.00

Contribution - Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Barney J Skladany, Jr.

Mailing Address 1333 New Hampshire Ave NW

City State Zip Code
Washington DC 20036-1511

FEC ID number of contributing federal political committee.

C

Name of Employer
Akin Gump

Occupation
Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.5562

Amount of Each Receipt this Period

250.00

Contribution - Primary

C.

Full Name (Last, First, Middle Initial)
Mr. Raymond J Smith

Mailing Address 41410 Kehoe Tract Road

City State Zip Code
Clayton NY 13624

FEC ID number of contributing federal political committee.

C

Name of Employer
Smithe Contracting

Occupation
Contractor - Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5616

Amount of Each Receipt this Period

1500.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Lloyd Sprung

Mailing Address 36 Mooreland Rd

City State Zip Code
Greenwich CT 06831

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

Name of Employer Occupation
Miller Buckfire & Co. LLC Investment Banker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.5578

Amount of Each Receipt this Period
400.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Lloyd Sprung

Mailing Address 36 Mooreland Rd

City State Zip Code
Greenwich CT 06831

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

Name of Employer Occupation
Miller Buckfire & Co. LLC Investment Banker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.6038

Amount of Each Receipt this Period
600.00

Contribution - Primary

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

Mailing Address 3060 Greentree Court

City State Zip Code
Los Angeles CA 90077

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

Name of Employer Occupation
Klee Tuchin Bogdanoff & Stern Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5781

Amount of Each Receipt this Period
1000.00

Contribution - Primary

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

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

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

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

FOR LINE NUMBER: PAGE 39 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew P Strehle
Mailing Address 231 Leavitt Street
City Hingham State MA Zip Code 02043
FEC ID number of contributing federal political committee. **C**
Name of Employer Brown Rudnick Occupation Attorney
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.5713
Amount of Each Receipt this Period 250.00
Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mrs. Carla Subin
Mailing Address 8 Palm Court
City Sewalls Point State FL Zip Code 34996
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 06 / 18 / 2010
Transaction ID: SA11AI.5289
Amount of Each Receipt this Period 2400.00
Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. Neil Subin
Mailing Address 8 Palm Court
City Sewalls Point State FL Zip Code 34996
FEC ID number of contributing federal political committee. **C**
Name of Employer Sonnenschein PC Occupation Attorney
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 06 / 18 / 2010
Transaction ID: SA11AI.5291
Amount of Each Receipt this Period 2400.00
Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► 5050.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. James R Taylor

Mailing Address 1405 31st Street NW

City Washington State DC Zip Code 20007-3140

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

Name of Employer DeMatteo Monness LLC Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 24 / 2010
Transaction ID: SA11AI.5564
 Amount of Each Receipt this Period 500.00
 Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Ronald Thomson

Mailing Address 47268 Cooper Lane

City Alexandria Bay State NY Zip Code 13607

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

Name of Employer Uncle Sam Boat Tours Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2010
Transaction ID: SA11AI.5092
 Amount of Each Receipt this Period 500.00
 Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Dr. Meryl Tuchin

Mailing Address 1999 Avenue of the Stars #3900

City Los Angeles State CA Zip Code 90067

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

Name of Employer UCLA Occupation Doctor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.5783
 Amount of Each Receipt this Period 2000.00
 Contribution - Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. James R Tucker, Jr.
Mailing Address 2237 46th Street NW
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C**
Name of Employer Akin Gump Occupation Attorney
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 06 / 24 / 2010
Transaction ID: SA11AI.5566
Amount of Each Receipt this Period 1000.00
Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mr. Gerard Uzzi
Mailing Address 82 Beechwood Drive
City Shewsbury State NJ Zip Code 07702
FEC ID number of contributing federal political committee. **C**
Name of Employer White & Case LLP Occupation Attorney
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 05 / 26 / 2010
Transaction ID: SA11AI.5109
Amount of Each Receipt this Period 2400.00
Contribution - General

C. Full Name (Last, First, Middle Initial)
Mr. Gerard Uzzi
Mailing Address 82 Beechwood Drive
City Shewsbury State NJ Zip Code 07702
FEC ID number of contributing federal political committee. **C**
Name of Employer White & Case LLP Occupation Attorney
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00
Date of Receipt 05 / 26 / 2010
Transaction ID: SA11AI.5110
Amount of Each Receipt this Period 2400.00
Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► 5800.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 42 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Jennifer C Uzzi

Mailing Address 82 Beechwood Drive

City State Zip Code
Shrewsbury NJ 07702

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.5111

Amount of Each Receipt this Period
2400.00

Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Mrs. Jennifer C Uzzi

Mailing Address 82 Beechwood Drive

City State Zip Code
Shrewsbury NJ 07702

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.5113

Amount of Each Receipt this Period
2400.00

Contribution - General

C. Full Name (Last, First, Middle Initial)
Mr. Peter M Virga

Mailing Address 16591 Deer Run Road

City State Zip Code
Watertown NY 13601

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

Name of Employer Occupation
Self Employed Dentist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.5140

Amount of Each Receipt this Period
300.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **5100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 123

(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)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Ian P Ward

Mailing Address P.O. Box 553

City State Zip Code
Sackets Harbor NY 13685

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

Name of Employer Occupation
Ward Dental Practice Dentist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5603

Amount of Each Receipt this Period

250.00

Contribution - Primary

B.

Full Name (Last, First, Middle Initial)
Mrs. Karen Wartell

Mailing Address 143 Reade St # 11A

City State Zip Code
New York NY 10013-3826

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

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

Transaction ID: SA11AI.5270

Amount of Each Receipt this Period

2400.00

Contribution - Primary

C.

Full Name (Last, First, Middle Initial)
Mrs. Karen Wartell

Mailing Address 143 Reade St # 11A

City State Zip Code
New York NY 10013-3826

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00

Date of Receipt

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

Transaction ID: SA11AI.5272

Amount of Each Receipt this Period

2400.00

Contribution - General

SUBTOTAL of Receipts This Page (optional) ▶

5050.00

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

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

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Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

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

Mailing Address 180 W 20th Street
#phh

City State Zip Code
New York NY 10011

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

Name of Employer Venor Capital Occupation Portfolio Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 04 / 23 / 2010
Transaction ID: SA11AI.5268
 Amount of Each Receipt this Period: 2400.00
 Contribution - Primary

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

Mailing Address 180 W 20th Street
#phh

City State Zip Code
New York NY 10011

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

Name of Employer Venor Capital Occupation Portfolio Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 04 / 23 / 2010
Transaction ID: SA11AI.5269
 Amount of Each Receipt this Period: 2400.00
 Contribution - General

C. Full Name (Last, First, Middle Initial)
Mrs. Ellen Weisfelner

Mailing Address 351 East 84th Street

City State Zip Code
New York NY 10028

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

Name of Employer Homemaker Occupation homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 22 / 2010
Transaction ID: SA11AI.5309
 Amount of Each Receipt this Period: 1000.00
 Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Dennis Weller

Mailing Address 4628 Bloomsbury Drive

City State Zip Code
Syracuse NY 13215

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

Name of Employer Occupation
Structural Associates Construction - CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.5082

Amount of Each Receipt this Period
250.00

Contribution - Primary

250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Catherine White

Mailing Address 49 Parkway Drive

City State Zip Code
Rye NY 10580-2521

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5715

Amount of Each Receipt this Period
2400.00

Contribution - Primay

2400.00

C. Full Name (Last, First, Middle Initial)
Mrs. Catherine White

Mailing Address 49 Parkway Drive

City State Zip Code
Rye NY 10580-2521

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.5717

Amount of Each Receipt this Period
2400.00

Contribution - General

4800.00

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Martin T Whitmer, Jr.
Mailing Address 2915 King Street
City Alexandria State VA Zip Code 22302
FEC ID number of contributing federal political committee. **C**
Name of Employer Whitmer & Worrall Occupation Government Relations - Business Owner
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 500.00
Date of Receipt 06 / 24 / 2010
Transaction ID: SA11AI.5568
Amount of Each Receipt this Period 500.00
Contribution - Primary

B. Full Name (Last, First, Middle Initial)
Matthew Williams
Mailing Address 72 Silverton Avenue
City Little Silver State NJ Zip Code 07739
FEC ID number of contributing federal political committee. **C**
Name of Employer Gibson, Dunn & Crutcher Occupation Attorney
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 2400.00
Date of Receipt 06 / 22 / 2010
Transaction ID: SA11AI.5307
Amount of Each Receipt this Period 2400.00
Contribution - Primary

C. Full Name (Last, First, Middle Initial)
Mr. V. Thomas Worrall, IV
Mailing Address 6118 Woodmond Road
City Alexandria State VA Zip Code 22307
FEC ID number of contributing federal political committee. **C**
Name of Employer Whitmer & Worrall Occupation Government Relations - Business Owner
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 500.00
Date of Receipt 06 / 24 / 2010
Transaction ID: SA11AI.5570
Amount of Each Receipt this Period 500.00
Contribution - Primary

SUBTOTAL of Receipts This Page (optional) ► 3400.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 123
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial) Mr. Dean A Ziehl		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
Mailing Address 10100 Santa Monica Ste 1100		Transaction ID: SA11AI.5690
City Los Angeles	State CA	Zip Code 90067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Pachulski Stang Ziehl & Jones	Occupation Attorney	Contribution - Primary
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	147373.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 123
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Friends of John M. Becker

Mailing Address 7142 Harsh Road

City State Zip Code
Canastota NY 13032

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
99.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2010

Transaction ID: SA11C.5280

Amount of Each Receipt this Period
99.00

Contribution - Primary

SUBTOTAL of Receipts This Page (optional)	▶	99.00
TOTAL This Period (last page this line number only)	▶	99.00

A. Form/Schedule : **SA11C**
Transaction ID : **SA11C.5280**

A contribution check is being refunded to Friends of John M. Becker as it is not a federal campaign committee.

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Matthew Doheny

Mailing Address 303 Paddock Street

City State Zip Code
Watertown NY 13601

FEC ID number of contributing federal political committee. **C** H0NY23057

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2010

Transaction ID: SA13A.5725

Amount of Each Receipt this Period
100000.00

Payable by Nov 30

SUBTOTAL of Receipts This Page (optional)	▶	100000.00
TOTAL This Period (last page this line number only)	▶	100000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 123	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial) USAirway		Date of Receipt																				
Mailing Address 111 W. Rio Salado Parkway		<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>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	8		2	0	1	0													
City	State	Zip Code																				
Tempe	AZ	85281																				
FEC ID number of contributing federal political committee.		Transaction ID: SA14.6028																				
C		Amount of Each Receipt this Period																				
		305.40																				
Name of Employer	Occupation	Refund of Flight Travel Expense																				
Receipt For: 2010	Election Cycle-to-Date ▼																					
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Other (specify) ▼		305.40																				

SUBTOTAL of Receipts This Page (optional)	▶	305.40
TOTAL This Period (last page this line number only)	▶	305.40

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) 200 Washington Street Associates, LLC. Mailing Address 106 Washington Street City Watertown State NY Zip Code 13601 Purpose of Disbursement April office rent Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5361 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0	Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) 200 Washington Street Associates, LLC. Mailing Address 106 Washington Street City Watertown State NY Zip Code 13601 Purpose of Disbursement May office rent Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5412 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 0	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) 200 Washington Street Associates, LLC. Mailing Address 106 Washington Street City Watertown State NY Zip Code 13601 Purpose of Disbursement Office Rent - June Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5453 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 0	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional)		1500.00	
TOTAL This Period (last page this line number only)			

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Alphasites Networking Systems Inc. <hr/> Mailing Address 12902 Fraternal Rd <hr/> City Herndon State VA Zip Code 20171 <hr/> Purpose of Disbursement Domain name expense Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5365 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 822.15
B. Full Name (Last, First, Middle Initial) Alphasites Networking Systems Inc. <hr/> Mailing Address 12902 Fraternal Rd <hr/> City Herndon State VA Zip Code 20171 <hr/> Purpose of Disbursement Two months of website hosting Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5367 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2470.00
C. Full Name (Last, First, Middle Initial) Alphasites Networking Systems Inc. <hr/> Mailing Address 12902 Fraternal Rd <hr/> City Herndon State VA Zip Code 20171 <hr/> Purpose of Disbursement Domain privacy fees Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5368 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 65.85

SUBTOTAL of Disbursements This Page (optional)	3358.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Alphasites Networking Systems Inc. <hr/> Mailing Address 12902 Fraternal Rd <hr/> City Herndon State VA Zip Code 20171 <hr/> Purpose of Disbursement Domain hosting Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5539 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1834.00
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Arsenal Wine & Liquor <hr/> Mailing Address 940 Arsenal St. <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Beverages for Fundraising Event Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5954 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 527.79
	Category/ Type 007
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. James Bell <hr/> Mailing Address 116 Central Park South Apt 7c <hr/> City New York State NY Zip Code 10019 <hr/> Purpose of Disbursement NYC Monday Meeting Event Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5508 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 3500.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5861.79

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group Mailing Address 1100 G Street, Suite 800 City Washington State DC Zip Code 20005 Purpose of Disbursement Fundraising strategy services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5359 Date of Disbursement 04 / 06 / 2010 Amount of Each Disbursement this Period 1000.00 Category/Type: 003
B.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group Mailing Address 1100 G Street, Suite 800 City Washington State DC Zip Code 20005 Purpose of Disbursement Fundraising stratgey services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5381 Date of Disbursement 04 / 29 / 2010 Amount of Each Disbursement this Period 1000.00 Category/Type: 003
C.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group Mailing Address 1100 G Street, Suite 800 City Washington State DC Zip Code 20005 Purpose of Disbursement Fundraising strategy services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5413 Date of Disbursement 05 / 12 / 2010 Amount of Each Disbursement this Period 1000.00 Category/Type: 003

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 Detailed Summary Page

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Charlie Berry <hr/> Mailing Address 1067 Marble St. <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Transportation stipend for 11 county tour <hr/> Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5374 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period 400.00
B.	Full Name (Last, First, Middle Initial) Best Western Carriage House <hr/> Mailing Address 300 Washington Street <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Hotel conference room for announcement <hr/> Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5788 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 1 0	Amount of Each Disbursement this Period 489.88
C.	Full Name (Last, First, Middle Initial) Best Western Carriage House <hr/> Mailing Address 300 Washington Street <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Room for announcement <hr/> Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5795 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period 134.44

SUBTOTAL of Disbursements This Page (optional)	1024.32
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Best Western Carriage House Mailing Address 300 Washington Street City Watertown State NY Zip Code 13601 Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5859 Date of Disbursement 05 / 17 / 2010 Amount of Each Disbursement this Period 127.35 Category/Type 004
B.	Full Name (Last, First, Middle Initial) Best Western Carriage House Mailing Address 300 Washington Street City Watertown State NY Zip Code 13601 Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5860 Date of Disbursement 05 / 17 / 2010 Amount of Each Disbursement this Period 114.61 Category/Type 004
C.	Full Name (Last, First, Middle Initial) Best Western Carriage House Mailing Address 300 Washington Street City Watertown State NY Zip Code 13601 Purpose of Disbursement Hotel rooms for commercial crew Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5863 Date of Disbursement 05 / 19 / 2010 Amount of Each Disbursement this Period 660.45 Category/Type 004

SUBTOTAL of Disbursements This Page (optional) ▶

902.41

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Best Western Carriage House	Transaction ID: SB17.5973 Date of Disbursement
	Mailing Address 300 Washington Street	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Watertown State NY Zip Code 13601	Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging	<input type="text" value="265.77"/>
	Candidate Name Doheny for Congress	<input type="text" value="002"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Best Western Carriage House	Transaction ID: SB17.5974 Date of Disbursement
	Mailing Address 300 Washington Street	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Watertown State NY Zip Code 13601	Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging	<input type="text" value="265.77"/>
	Candidate Name Doheny for Congress	<input type="text" value="002"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Best Western Carriage House	Transaction ID: SB17.5975 Date of Disbursement
	Mailing Address 300 Washington Street	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Watertown State NY Zip Code 13601	Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging	<input type="text" value="177.18"/>
	Candidate Name Doheny for Congress	<input type="text" value="002"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="708.72"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Best Western Carriage House

Mailing Address 300 Washington Street

City State Zip Code
Watertown NY 13601

Purpose of Disbursement
Lodging

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5976
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	0

Amount of Each Disbursement this Period

177.18

B.

Full Name (Last, First, Middle Initial)
BQE, Inc.

Mailing Address 99 Pine Street
Suite 104

City State Zip Code
Albany NY 12207

Purpose of Disbursement
Field Director - February

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5358
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
BQE, Inc.

Mailing Address 99 Pine Street
Suite 104

City State Zip Code
Albany NY 12207

Purpose of Disbursement
Reimburse March 2nd travel expenses

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5419
Date of Disbursement

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

Amount of Each Disbursement this Period

99.50

SUBTOTAL of Disbursements This Page (optional)

5276.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) BQE, Inc. Mailing Address 99 Pine Street Suite 104 City Albany State NY Zip Code 12207 Purpose of Disbursement Field Director Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5420 Date of Disbursement 05 / 12 / 2010 Amount of Each Disbursement this Period 5000.00 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) BQE, Inc. Mailing Address 99 Pine Street Suite 104 City Albany State NY Zip Code 12207 Purpose of Disbursement Field Director Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5452 Date of Disbursement 05 / 27 / 2010 Amount of Each Disbursement this Period 5000.00 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) BQE, Inc. Mailing Address 99 Pine Street Suite 104 City Albany State NY Zip Code 12207 Purpose of Disbursement Field Director Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5526 Date of Disbursement 06 / 21 / 2010 Amount of Each Disbursement this Period 5000.00 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Brennan Group Consulting LLC. Mailing Address 7705 Sally Road City Waterville State NY Zip Code 13480 Purpose of Disbursement Field Director CNY Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5336 Date of Disbursement 04 / 05 / 2010 Amount of Each Disbursement this Period 3000.00 Category/ Type 001
B.	Full Name (Last, First, Middle Initial) Brennan Group Consulting LLC. Mailing Address 7705 Sally Road City Waterville State NY Zip Code 13480 Purpose of Disbursement Field Director CNY Mileage Reimbursement Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5351 Date of Disbursement 04 / 06 / 2010 Amount of Each Disbursement this Period 309.68 Category/ Type 002
C.	Full Name (Last, First, Middle Initial) Brennan Group Consulting LLC. Mailing Address 7705 Sally Road City Waterville State NY Zip Code 13480 Purpose of Disbursement Field Director CNY Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5404 Date of Disbursement 05 / 06 / 2010 Amount of Each Disbursement this Period 3000.00 Category/ Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	6309.68
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Brennan Group Consulting LLC. <hr/> Mailing Address 7705 Sally Road <hr/> City Waterville State NY Zip Code 13480 <hr/> Purpose of Disbursement March & April Travel Expense Reimbursement Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5418 Date of Disbursement 05 / 12 / 2010
	Amount of Each Disbursement this Period 1398.87
	Category/ Type 002
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Brennan Group Consulting LLC. <hr/> Mailing Address 7705 Sally Road <hr/> City Waterville State NY Zip Code 13480 <hr/> Purpose of Disbursement Field Director CNY Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5489 Date of Disbursement 06 / 09 / 2010
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Cary R. Brick <hr/> Mailing Address P. O. Box 3 <hr/> City Clayton State NY Zip Code 13624 <hr/> Purpose of Disbursement Senior Communications Advisor April/May Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5392 Date of Disbursement 05 / 01 / 2010
	Amount of Each Disbursement this Period 6000.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

10398.87

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) BusinessKeeping</p> <p>Mailing Address 26 Valdepenas Lane</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Bookkeeping services March 2010</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5362</p> <p>Date of Disbursement 04 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 837.50</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) BusinessKeeping</p> <p>Mailing Address 26 Valdepenas Lane</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement April FEC Filing/bookkeeping services</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5534</p> <p>Date of Disbursement 06 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Butcher Block Restaurant</p> <p>Mailing Address 15 Booth Drive</p> <p>City Plattsburgh State NY Zip Code 12901</p> <p>Purpose of Disbursement Campaign travel</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5820</p> <p>Date of Disbursement 04 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 227.41</p> <p>002 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2564.91

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Butcher Block Restaurant <hr/> Mailing Address 15 Booth Drive <hr/> City Plattsburgh State NY Zip Code 12901 Purpose of Disbursement Campaign travel Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5824 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 32.00
	Category/Type 002
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Butcher Block Restaurant <hr/> Mailing Address 15 Booth Drive <hr/> City Plattsburgh State NY Zip Code 12901 Purpose of Disbursement Campaign travel Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5825 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 8.75
	Category/Type 002
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Clarence Henry Coach <hr/> Mailing Address 1067 Marble St. <hr/> City Watertown State NY Zip Code 13601 Purpose of Disbursement Transportation Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5354 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 3000.00
	Category/Type 002
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3040.75

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Coughlin Printing Group Mailing Address 144 Main Avenue City Watertown State NY Zip Code 13601 Purpose of Disbursement Printing Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5389 Date of Disbursement 05 / 01 / 2010 Amount of Each Disbursement this Period 2556.40 Category/Type 006
B.	Full Name (Last, First, Middle Initial) Coughlin Printing Group Mailing Address 144 Main Avenue City Watertown State NY Zip Code 13601 Purpose of Disbursement Printing Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5390 Date of Disbursement 05 / 01 / 2010 Amount of Each Disbursement this Period 3096.49 Category/Type 003
C.	Full Name (Last, First, Middle Initial) Coughlin Printing Group Mailing Address 144 Main Avenue City Watertown State NY Zip Code 13601 Purpose of Disbursement Printing Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5450 Date of Disbursement 05 / 27 / 2010 Amount of Each Disbursement this Period 389.90 Category/Type 006

SUBTOTAL of Disbursements This Page (optional) ▶

6042.79

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Coughlin Printing Group

Transaction ID: SB17.5451
Date of Disbursement

Mailing Address 144 Main Avenue

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

7283.90

Purpose of Disbursement

004

Category/
Type

Website creative

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

B.

Full Name (Last, First, Middle Initial)
Coughlin Printing Group

Transaction ID: SB17.5472
Date of Disbursement

Mailing Address 144 Main Avenue

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

1369.55

Purpose of Disbursement

003

Category/
Type

Printing

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

C.

Full Name (Last, First, Middle Initial)
Creative Imaging

Transaction ID: SB17.5352
Date of Disbursement

Mailing Address P. O. Box 916
15580 NYS Route 193

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

City State Zip Code
Pierrepont Manor NY 13674

Amount of Each Disbursement this Period

431.00

Purpose of Disbursement

004

Category/
Type

TV Production

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

SUBTOTAL of Disbursements This Page (optional) ▶

9084.45

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) CrossRoads Media LLC <hr/> Mailing Address 506 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Advertising Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5509 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 67178.36
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dean & Deluca <hr/> Mailing Address 1150 Madison Ave <hr/> City New York State NY Zip Code 10016 <hr/> Purpose of Disbursement Catering Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5967 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 2266.05
	Category/ Type 007
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Delta Airlines <hr/> Mailing Address P. O. Box 20706 <hr/> City Atlanta State GA Zip Code 30320 <hr/> Purpose of Disbursement Airfare Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5993 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 365.40
	Category/ Type 002
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

69809.81

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Department of New York State

Transaction ID: SB17.5437
Date of Disbursement

Mailing Address One Commerce Plaza
99 Washington Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	0

City Albany State NY Zip Code 12231

Amount of Each Disbursement this Period

60.00

Purpose of Disbursement
Notary Fee - Julia Robbins

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Department of New York State

Transaction ID: SB17.5438
Date of Disbursement

Mailing Address One Commerce Plaza
99 Washington Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	0

City Albany State NY Zip Code 12231

Amount of Each Disbursement this Period

60.00

Purpose of Disbursement
Notary Fee - Jennifer Kelly

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Department of New York State

Transaction ID: SB17.5440
Date of Disbursement

Mailing Address One Commerce Plaza
99 Washington Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	0

City Albany State NY Zip Code 12231

Amount of Each Disbursement this Period

60.00

Purpose of Disbursement
Notary Fee - Marshall Weir

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

180.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 69 / 123

<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)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Department of New York State	Transaction ID: SB17.5441 Date of Disbursement																			
	Mailing Address One Commerce Plaza 99 Washington 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>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	0												
	City Albany State NY Zip Code 12231	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Notary Fee -Kristina Kincaide	<table border="1"><tr><td>60.00</td></tr></table>	60.00																		
60.00																					
	Candidate Name Doheny for Congress	001 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
B.	Full Name (Last, First, Middle Initial) Ferris, Kristina	Transaction ID: SB17.6011 Date of Disbursement																			
	Mailing Address 22736 Tall Timber Trail	<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>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	1	0												
	City Watertown State NY Zip Code 13601	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Gross Payroll 268.00 w/d \$27.71	<table border="1"><tr><td>246.29</td></tr></table>	246.29																		
246.29																					
	Candidate Name Doheny for Congress	001 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
C.	Full Name (Last, First, Middle Initial) Ferris, Kristina	Transaction ID: SB17.5493 Date of Disbursement																			
	Mailing Address 22736 Tall Timber Trail	<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>6</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	1		2	0	1	0												
	City Watertown State NY Zip Code 13601	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Reimburse delivers mileage 5/4 & 5/6/10	<table border="1"><tr><td>88.90</td></tr></table>	88.90																		
88.90																					
	Candidate Name Doheny for Congress	002 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional) ▶

395.19

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Ferris, Kristina	Transaction ID: SB17.5494
	Mailing Address 22736 Tall Timber Trail	Date of Disbursement MM / DD / YYYY 06 / 11 / 2010
	City Watertown State NY Zip Code 13601	Amount of Each Disbursement this Period 5.19
	Purpose of Disbursement: Supplies Candidate Name: Doheny for Congress	001 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ferris, Kristina	Transaction ID: SB17.6021
	Mailing Address 22736 Tall Timber Trail	Date of Disbursement MM / DD / YYYY 06 / 18 / 2010
	City Watertown State NY Zip Code 13601	Amount of Each Disbursement this Period 557.86
	Purpose of Disbursement: Gross Payroll 658 w/d \$100.14 Candidate Name: Doheny for Congress	001 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) First Rehabilitation Llife Insurance Company of America	Transaction ID: SB17.5511
	Mailing Address A.T. Matthews & Dier 636 Coffeen St.	Date of Disbursement MM / DD / YYYY 06 / 17 / 2010
	City Watertown State NY Zip Code 13601	Amount of Each Disbursement this Period 443.40
	Purpose of Disbursement: Annual Disb Insurance Candidate Name: Doheny for Congress	001 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1006.45
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
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Franklin County Republican Committee

Mailing Address c/o James Ellis
58 Broad St.

City Tupper Lake State NY Zip Code 12986

Purpose of Disbursement
Advertising

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

004
Category/
Type

Transaction ID: SB17.5543
Date of Disbursement

06 / 22 / 2010

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Greener & Hook

Mailing Address 2101 Wilson Blvd, Ste 402

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Public Relations & Media Services

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

004
Category/
Type

Transaction ID: SB17.5428
Date of Disbursement

05 / 17 / 2010

Amount of Each Disbursement this Period

15000.00

C. Full Name (Last, First, Middle Initial)
Greener & Hook

Mailing Address 2101 Wilson Blvd, Ste 402

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Public Relations & Media Services

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

004
Category/
Type

Transaction ID: SB17.5992
Date of Disbursement

06 / 23 / 2010

Amount of Each Disbursement this Period

75000.00

SUBTOTAL of Disbursements This Page (optional)

90500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Holiday Inn Express <hr/> Mailing Address 15 West 45th St. <hr/> City New York State NY Zip Code 10036 <hr/> Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5972 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 403.97
	Category/ Type 002
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) HSBC Bank USA, N.A. <hr/> Mailing Address 30 South Pearl St. <hr/> City Albany State NY Zip Code 12207 <hr/> Purpose of Disbursement Returned check fee Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5832 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 10.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Hyatt Hotels <hr/> Mailing Address 1201 24th Street NW <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5845 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 388.16
	Category/ Type 007
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	802.13
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) JEBS Restaurant		Transaction ID: SB17.5804	
	Mailing Address 5403 Shady Avenue		Date of Disbursement 04 / 12 / 2010	
	City Lowville	State NY	Zip Code 13367-1601	Amount of Each Disbursement this Period 374.78
	Purpose of Disbursement Meals		002 Category/ Type	
Candidate Name Doheny for Congress		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: NY District: 23		

B.	Full Name (Last, First, Middle Initial) Jefferson County Fair		Transaction ID: SB17.5524	
	Mailing Address P.O. Box 8003		Date of Disbursement 06 / 18 / 2010	
	City Watertown	State NY	Zip Code 13601	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement Advertisement		004 Category/ Type	
Candidate Name Doheny for Congress		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: NY District: 23		

C.	Full Name (Last, First, Middle Initial) Jefferson County Republican Committee		Transaction ID: SB17.5387	
	Mailing Address 200 Washington St. Ste 208		Date of Disbursement 05 / 01 / 2010	
	City Watertown	State NY	Zip Code 13601	Amount of Each Disbursement this Period 525.00
	Purpose of Disbursement Advertisement		004 Category/ Type	
Candidate Name Doheny for Congress		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: NY District: 23		

SUBTOTAL of Disbursements This Page (optional) **1149.78**

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) JetBlue Mailing Address 118-29 Queens Blvd City Forest Hills State NY Zip Code 11375 Purpose of Disbursement Airfare Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5878 Date of Disbursement 05 / 28 / 2010 Amount of Each Disbursement this Period 315.40 Category/Type 002
B.	Full Name (Last, First, Middle Initial) JL & S Consulting, LLC Mailing Address 365 Rifle Camp Rd. City Woodland Park State NJ Zip Code 07424 Purpose of Disbursement Campaign Research Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5363 Date of Disbursement 04 / 14 / 2010 Amount of Each Disbursement this Period 2250.00 Category/Type 001
C.	Full Name (Last, First, Middle Initial) Jolly Good Promotional Products Mailing Address 17 Bracken Rd City Morrisonville State NY Zip Code 12962 Purpose of Disbursement Lawn signs Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5814 Date of Disbursement 04 / 21 / 2010 Amount of Each Disbursement this Period 1985.00 Category/Type 004

SUBTOTAL of Disbursements This Page (optional)	4550.40
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Jolly Good Promotional Products <hr/> Mailing Address 17 Bracken Rd <hr/> City Morrisonville State NY Zip Code 12962 <hr/> Purpose of Disbursement Handout Printing Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5429 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 422.80
	Category/ Type 006
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jennifer Kelly <hr/> Mailing Address P. O. Box 84 <hr/> City Morristown State NY Zip Code 13664 <hr/> Purpose of Disbursement Administrative Services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5333 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jennifer Kelly <hr/> Mailing Address P. O. Box 84 <hr/> City Morristown State NY Zip Code 13664 <hr/> Purpose of Disbursement Convention attendance/hotel Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5339 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 113.59
	Category/ Type 002
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1536.39

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

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

Transaction ID: SB17.5340
Date of Disbursement

Mailing Address P. O. Box 84

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

City State Zip Code
Morristown NY 13664

Amount of Each Disbursement this Period

Purpose of Disbursement
Office supplies 158.41, Shipping 51.71

001
Category/
Type

210.12

Candidate Name
Doheny for Congress

Office Sought: House Senate President
State: NY District: 23
Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

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

Transaction ID: SB17.5341
Date of Disbursement

Mailing Address P. O. Box 84

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

City State Zip Code
Morristown NY 13664

Amount of Each Disbursement this Period

Purpose of Disbursement
Reimburse VerizonWireless charges

001
Category/
Type

409.54

Candidate Name
Doheny for Congress

Office Sought: House Senate President
State: NY District: 23
Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

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

Transaction ID: SB17.5369
Date of Disbursement

Mailing Address P. O. Box 84

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

City State Zip Code
Morristown NY 13664

Amount of Each Disbursement this Period

Purpose of Disbursement
Adminstrative Services

001
Category/
Type

1000.00

Candidate Name
Doheny for Congress

Office Sought: House Senate President
State: NY District: 23
Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1619.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Jennifer Kelly <hr/> Mailing Address P. O. Box 84 <hr/> City State Zip Code Morristown NY 13664 Purpose of Disbursement Administrative Services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6034 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jennifer Kelly <hr/> Mailing Address P. O. Box 84 <hr/> City State Zip Code Morristown NY 13664 Purpose of Disbursement Gross Payroll 1153.85 w/h 264.62 - Administrative Services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5456 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 1 0
	Amount of Each Disbursement this Period 889.23
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jennifer Kelly <hr/> Mailing Address P. O. Box 84 <hr/> City State Zip Code Morristown NY 13664 Purpose of Disbursement Gross Pay 1346.15 w/h 321.36 - Administrative Services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5462 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1024.79
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2414.02

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

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

Transaction ID: SB17.5454
Date of Disbursement

Mailing Address P. O. Box 84

/ /

City State Zip Code
Morristown NY 13664

Amount of Each Disbursement this Period

Purpose of Disbursement
Reimbursement for travel expenses

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

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

Transaction ID: SB17.5455
Date of Disbursement

Mailing Address P. O. Box 84

/ /

City State Zip Code
Morristown NY 13664

Amount of Each Disbursement this Period

Purpose of Disbursement
Office supplies and flags for office

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

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

Transaction ID: SB17.5499
Date of Disbursement

Mailing Address P. O. Box 84

/ /

City State Zip Code
Morristown NY 13664

Amount of Each Disbursement this Period

Purpose of Disbursement
Gross Pay 1250.00 w/d 292.99

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Jennifer Kelly Mailing Address P. O. Box 84 City Morristown State NY Zip Code 13664 Purpose of Disbursement Cellphone 205.38 + Ofc supplies 70.27 Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5500 Date of Disbursement 06 / 11 / 2010 Amount of Each Disbursement this Period 275.65 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Jennifer Kelly Mailing Address P. O. Box 84 City Morristown State NY Zip Code 13664 Purpose of Disbursement Meals reimbursement Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6012 Date of Disbursement 06 / 11 / 2010 Amount of Each Disbursement this Period 519.81 002 Category/ Type
C.	Full Name (Last, First, Middle Initial) Jennifer Kelly Mailing Address P. O. Box 84 City Morristown State NY Zip Code 13664 Purpose of Disbursement Reimburse travel mileage for 6/8 and 6/18/10 Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5517 Date of Disbursement 06 / 18 / 2010 Amount of Each Disbursement this Period 70.00 002 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	865.46
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Jennifer Kelly Mailing Address P. O. Box 84 City Morristown State NY Zip Code 13664 Purpose of Disbursement Gross Pay 1250.00 w/d 292.99 Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6022 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 0	Amount of Each Disbursement this Period 957.01
B.	Full Name (Last, First, Middle Initial) Kris Marsala Photography Mailing Address 1142 Academy St. City Watertown State NY Zip Code 13601 Purpose of Disbursement April7, May 17-18 photo shoots Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2101 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5532 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period 1100.00
C.	Full Name (Last, First, Middle Initial) La Quinta Inns Mailing Address 15 Plaza Blevd City Plattsburg State NY Zip Code 12901 Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5812 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 79.92

SUBTOTAL of Disbursements This Page (optional) ▶

2136.93

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) La Quinta Inns Mailing Address 15 Plaza Blvd City Plattsburg State NY Zip Code 12901 Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5813 Date of Disbursement 04 / 19 / 2010 Amount of Each Disbursement this Period 79.92 Category/Type 002
B.	Full Name (Last, First, Middle Initial) Liberty CPU Mailing Address 210 Court Street City Watertown State NY Zip Code 13601 Purpose of Disbursement Stamps Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5810 Date of Disbursement 04 / 16 / 2010 Amount of Each Disbursement this Period 220.00 Category/Type 001
C.	Full Name (Last, First, Middle Initial) Liberty CPU Mailing Address 210 Court Street City Watertown State NY Zip Code 13601 Purpose of Disbursement Postage Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5877 Date of Disbursement 05 / 27 / 2010 Amount of Each Disbursement this Period 440.00 Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	739.92
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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Liberty CPU		Transaction ID: SB17.5988	
	Mailing Address 210 Court Street		Date of Disbursement MM / DD / YYYY 06 / 21 / 2010	
	City Watertown	State NY	Zip Code 13601	Amount of Each Disbursement this Period 226.05
	Purpose of Disbursement Postage		Category/ Type 001	
Candidate Name Doheny for Congress				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 23				
B.	Full Name (Last, First, Middle Initial) Madison County Conservative Party		Transaction ID: SB17.5401	
	Mailing Address 614 Carbon St		Date of Disbursement MM / DD / YYYY 05 / 04 / 2010	
	City Syracuse	State NY	Zip Code 13208	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Full page advertisement		Category/ Type 004	
Candidate Name Doheny for Congress				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 23				
C.	Full Name (Last, First, Middle Initial) Maggies on the River		Transaction ID: SB17.5485	
	Mailing Address 500 Newell St		Date of Disbursement MM / DD / YYYY 06 / 07 / 2010	
	City Watertown	State NY	Zip Code 13601	Amount of Each Disbursement this Period 2200.62
	Purpose of Disbursement Meals/Catering		Category/ Type 007	
Candidate Name Doheny for Congress				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 23				

SUBTOTAL of Disbursements This Page (optional) ▶

2526.67

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Maggies on the River</p> <p>Mailing Address 500 Newell St</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Meals/Catering</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2301 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5949</p> <p>Date of Disbursement 06 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 36.14</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) New York State Income Tax</p> <p>Mailing Address State Processing Center P. O. Box 15555</p> <p>City Albany State NY Zip Code 12212</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5468</p> <p>Date of Disbursement 05 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 500.42</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) New York State Income Tax</p> <p>Mailing Address State Processing Center P. O. Box 15555</p> <p>City Albany State NY Zip Code 12212</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.6018</p> <p>Date of Disbursement 06 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 447.08</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

983.64

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) New York State Income Tax</p> <p>Mailing Address State Processing Center P. O. Box 15555</p> <p>City Albany State NY Zip Code 12212</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.6020</p> <p>Date of Disbursement MM / DD / YYYY 06 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 461.35</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) NewzJunky</p> <p>Mailing Address Arsenal St.</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Local News Advertising</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5503</p> <p>Date of Disbursement MM / DD / YYYY 06 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Category/Type 004</p>
<p>C. Full Name (Last, First, Middle Initial) Northern Copy Products</p> <p>Mailing Address 307 S. Hamilton Street</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Copier Rental - Feb & Mar</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5360</p> <p>Date of Disbursement MM / DD / YYYY 04 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 377.12</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2838.47

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Northern Copy Products Mailing Address 307 S. Hamilton Street City Watertown State NY Zip Code 13601 Purpose of Disbursement May Copier Rental Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5414 Date of Disbursement 05 / 12 / 2010 Amount of Each Disbursement this Period 188.56 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Patton Boggs LLP Attorneys at Law Mailing Address 2550 M Street, NW City Washington State DC Zip Code 20037 Purpose of Disbursement Legal Services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5356 Date of Disbursement 04 / 06 / 2010 Amount of Each Disbursement this Period 1503.00 Category/Type 001
C.	Full Name (Last, First, Middle Initial) Patton Boggs LLP Attorneys at Law Mailing Address 2550 M Street, NW City Washington State DC Zip Code 20037 Purpose of Disbursement Legal Services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5415 Date of Disbursement 05 / 12 / 2010 Amount of Each Disbursement this Period 1503.00 Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	3194.56
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Pershing Square <hr/> Mailing Address 90 East 42nd St. <hr/> City New York State NY Zip Code 10017 <hr/> Purpose of Disbursement Catering Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5997 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2030.10
	Category/ Type 007
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) David Plante <hr/> Mailing Address 16760 State Route 3 <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Entertainment Svcs Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5483 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 1 0
	Amount of Each Disbursement this Period 400.00
	Category/ Type 007
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Allison Power <hr/> Mailing Address 3 Monroe Parkway <hr/> City Massena State NY Zip Code 13662 <hr/> Purpose of Disbursement Communications Director Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5396 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 3500.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	5930.10
TOTAL This Period (last page this line number only) ▶	(Empty)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Allison Power Mailing Address 3 Monroe Parkway City Massena State NY Zip Code 13662 Purpose of Disbursement Communications Director Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5492 Date of Disbursement 06 / 10 / 2010 Amount of Each Disbursement this Period 3000.00 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Price Chopper Mailing Address 1283 Arsenal St City Watertown State NY Zip Code 13601 Purpose of Disbursement Office Supplies Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5989 Date of Disbursement 06 / 22 / 2010 Amount of Each Disbursement this Period 95.78 Category/Type 001
C.	Full Name (Last, First, Middle Initial) Qualtiy Inns Mailing Address 6765 State Highway 37 City Ogdensburg State NY Zip Code 13669 Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5870 Date of Disbursement 05 / 21 / 2010 Amount of Each Disbursement this Period 77.00 Category/Type 004

SUBTOTAL of Disbursements This Page (optional) ▶	3172.78
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Qualty Inns Mailing Address 6765 State Highway 37 City Ogdensburg State NY Zip Code 13669 Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Transaction ID: SB17.5871 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 77.00
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Qualty Inns Mailing Address 6765 State Highway 37 City Ogdensburg State NY Zip Code 13669 Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Transaction ID: SB17.5872 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 77.00
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Qualty Inns Mailing Address 6765 State Highway 37 City Ogdensburg State NY Zip Code 13669 Purpose of Disbursement Lodging Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Transaction ID: SB17.5875 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 181.26
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	335.26
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Ritz, Chris</p> <p>Mailing Address 643 S. Hamilton St.</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Beverage services</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5448</p> <p>Date of Disbursement 05 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>Category/Type 007</p>
<p>B. Full Name (Last, First, Middle Initial) Ms Julia C Robbins</p> <p>Mailing Address 14471 County Route 145</p> <p>City Sackets Harbor State NY Zip Code 13685</p> <p>Purpose of Disbursement Director of Administrative Services</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5331</p> <p>Date of Disbursement 04 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Ms Julia C Robbins</p> <p>Mailing Address 14471 County Route 145</p> <p>City Sackets Harbor State NY Zip Code 13685</p> <p>Purpose of Disbursement Director of Administrative Services</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5372</p> <p>Date of Disbursement 04 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 2250.00</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5100.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Ms Julia C Robbins	Transaction ID: SB17.5383
	Mailing Address 14471 County Route 145	Date of Disbursement MM / DD / YYYY 05 / 01 / 2010
	City Sackets Harbor State NY Zip Code 13685	Amount of Each Disbursement this Period 513.48
	Purpose of Disbursement Cell Phone \$90, Shipping \$10.20, Office Supplies \$413.28	001 Category/ Type
	Candidate Name Doheny for Congress	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ms Julia C Robbins	Transaction ID: SB17.5384
	Mailing Address 14471 County Route 145	Date of Disbursement MM / DD / YYYY 05 / 01 / 2010
	City Sackets Harbor State NY Zip Code 13685	Amount of Each Disbursement this Period 152.78
	Purpose of Disbursement Travel/Meals Expense reimbursement	002 Category/ Type
	Candidate Name Doheny for Congress	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms Julia C Robbins	Transaction ID: SB17.5457
	Mailing Address 14471 County Route 145	Date of Disbursement MM / DD / YYYY 05 / 07 / 2010
	City Sackets Harbor State NY Zip Code 13685	Amount of Each Disbursement this Period 1508.68
	Purpose of Disbursement Gross Payroll 2076.92 w/h 568.24 Director of Admin Svcs	001 Category/ Type
	Candidate Name Doheny for Congress	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2174.94
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.5423
Date of Disbursement

Mailing Address 14471 County Route 145

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

City Sackets Harbor State NY Zip Code 13685

Amount of Each Disbursement this Period

193.45

Purpose of Disbursement
Office Supplies reimbursement

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House Senate President
State: NY District: 23
Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.5424
Date of Disbursement

Mailing Address 14471 County Route 145

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

City Sackets Harbor State NY Zip Code 13685

Amount of Each Disbursement this Period

1742.15

Purpose of Disbursement
Notary Travel for MD & GW reimbursement

002

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House Senate President
State: NY District: 23
Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.5442
Date of Disbursement

Mailing Address 14471 County Route 145

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	0

City Sackets Harbor State NY Zip Code 13685

Amount of Each Disbursement this Period

43.85

Purpose of Disbursement
Supplies

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House Senate President
State: NY District: 23
Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

1979.45

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Ms Julia C Robbins</p> <p>Mailing Address 14471 County Route 145</p> <p>City Sackets Harbor State NY Zip Code 13685</p> <p>Purpose of Disbursement Reimburse travel/meals expenses</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5443</p> <p>Date of Disbursement 05 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 453.91</p> <p>Category/Type 002</p>
<p>B. Full Name (Last, First, Middle Initial) Ms Julia C Robbins</p> <p>Mailing Address 14471 County Route 145</p> <p>City Sackets Harbor State NY Zip Code 13685</p> <p>Purpose of Disbursement Reimburse Shipping expense</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5444</p> <p>Date of Disbursement 05 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 31.81</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Ms Julia C Robbins</p> <p>Mailing Address 14471 County Route 145</p> <p>City Sackets Harbor State NY Zip Code 13685</p> <p>Purpose of Disbursement Gross Payroll 2423.08 w/h 704.96 Director of Admin Svcs</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5463</p> <p>Date of Disbursement 05 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1718.12</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2203.84

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.5473

Date of Disbursement

Mailing Address 14471 County Route 145

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

City State Zip Code
Sackets Harbor NY 13685

Amount of Each Disbursement this Period

358.64

Purpose of Disbursement
Reimburse travel expenses

002

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

B.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.5474

Date of Disbursement

Mailing Address 14471 County Route 145

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

City State Zip Code
Sackets Harbor NY 13685

Amount of Each Disbursement this Period

215.80

Purpose of Disbursement
Ofc supplies 18.85, Shipping 69.38, Cellphone 64, Thankyou gift 63.57

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

C.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.6013

Date of Disbursement

Mailing Address 14471 County Route 145

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	0

City State Zip Code
Sackets Harbor NY 13685

Amount of Each Disbursement this Period

1613.40

Purpose of Disbursement
Gross Payroll 2250.00 w/h 636.6 Director of Admin Svcs

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

SUBTOTAL of Disbursements This Page (optional)

2187.84

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.5495
Date of Disbursement

Mailing Address 14471 County Route 145

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

City Sackets Harbor State NY Zip Code 13685

Amount of Each Disbursement this Period

57.83

Purpose of Disbursement
Shipping 17.81 and ofc supplies 40.02

001
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: NY District: 23

B.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.5496
Date of Disbursement

Mailing Address 14471 County Route 145

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

City Sackets Harbor State NY Zip Code 13685

Amount of Each Disbursement this Period

60.00

Purpose of Disbursement
Reimburse travel mileage Sackets & Henderson Petitions

002
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: NY District: 23

C.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.6023
Date of Disbursement

Mailing Address 14471 County Route 145

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	0

City Sackets Harbor State NY Zip Code 13685

Amount of Each Disbursement this Period

1613.40

Purpose of Disbursement
Gross Payroll 2250.00 w/h 636.6 Director of Admin Svcs

001
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: NY District: 23

SUBTOTAL of Disbursements This Page (optional)

1731.23

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Sage Payment Solutions Division	Transaction ID: SB17.5829 Date of Disbursement
	Mailing Address 1750 Old Meadow Road Suite 300	<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Gateway	<input type="text" value="25.00"/>
	Candidate Name Doheny for Congress	<input type="text" value="001"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sage Payment Solutions Division	Transaction ID: SB17.5839 Date of Disbursement
	Mailing Address 1750 Old Meadow Road Suite 300	<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees	<input type="text" value="25.00"/>
	Candidate Name Doheny for Congress	<input type="text" value="001"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sage Payment Solutions Division	Transaction ID: SB17.5930 Date of Disbursement
	Mailing Address 1750 Old Meadow Road Suite 300	<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Svc Fee	<input type="text" value="25.00"/>
	Candidate Name Doheny for Congress	<input type="text" value="001"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Sage Payment Solutions Division Mailing Address 1750 Old Meadow Road Suite 300 City McLean State VA Zip Code 22102 Purpose of Disbursement Record MC/Visa/Amx Merchant Fess Apr - June Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6030 Date of Disbursement 06 / 30 / 2010 Amount of Each Disbursement this Period 930.53 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Sam's Club Mailing Address 21341 Sam's Drive City Watertown State NY Zip Code 13601 Purpose of Disbursement Candy for parades Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5935 Date of Disbursement 06 / 03 / 2010 Amount of Each Disbursement this Period 132.14 Category/Type 007
C.	Full Name (Last, First, Middle Initial) Savory Cafe Mailing Address 1511 Washington Street City Watertown State NY Zip Code 13601 Purpose of Disbursement May 22nd Event Food Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5449 Date of Disbursement 05 / 24 / 2010 Amount of Each Disbursement this Period 1206.80 Category/Type 007

SUBTOTAL of Disbursements This Page (optional) ▶

2269.47

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

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

Mailing Address 1511 Washington Street

City State Zip Code
Watertown NY 13601

Purpose of Disbursement
Meal for Volunteers

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.6006
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	0

Amount of Each Disbursement this Period

34.01

B.

Full Name (Last, First, Middle Initial)
Seaway Sales Co

Mailing Address 135 Fairbanks Street

City State Zip Code
Watertown NY 13601-2816

Purpose of Disbursement
Announcement supplies

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5790
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

Amount of Each Disbursement this Period

562.28

C.

Full Name (Last, First, Middle Initial)
Seaway Sales Co

Mailing Address 135 Fairbanks Street

City State Zip Code
Watertown NY 13601-2816

Purpose of Disbursement
Announcement supplies

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5792
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

Amount of Each Disbursement this Period

203.41

SUBTOTAL of Disbursements This Page (optional) ►

799.70

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Sirk, Alicia

Transaction ID: SB17.5410
Date of Disbursement

Mailing Address 2017 State Route 22B

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

City Morrisonville State NY Zip Code 12962

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Local Campaign Coordinator

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

B.

Full Name (Last, First, Middle Initial)
Sirk, Alicia

Transaction ID: SB17.5425
Date of Disbursement

Mailing Address 2017 State Route 22B

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

City Morrisonville State NY Zip Code 12962

Amount of Each Disbursement this Period

225.00

Purpose of Disbursement
Reimburse notary travel expenses

002

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

C.

Full Name (Last, First, Middle Initial)
Sirk, Alicia

Transaction ID: SB17.5521
Date of Disbursement

Mailing Address 2017 State Route 22B

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	0

City Morrisonville State NY Zip Code 12962

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Local Campaign Coordinator

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

SUBTOTAL of Disbursements This Page (optional)

4225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) St. Lawrence County Republican Committee Mailing Address P. O. Box 775 City Canton State NY Zip Code 13617 Purpose of Disbursement Advertisement Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5431 Date of Disbursement 05 / 18 / 2010 Amount of Each Disbursement this Period 400.00 Category/ Type 004
B.	Full Name (Last, First, Middle Initial) Staples Mailing Address 1283 Arsenal Street City Watertown State NY Zip Code 13601 Purpose of Disbursement Office Supplies Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5952 Date of Disbursement 06 / 08 / 2010 Amount of Each Disbursement this Period 14.00 Category/ Type 001
C.	Full Name (Last, First, Middle Initial) The Children's Clinic Mailing Address 238 Arsenal St. City Watertown State NY Zip Code 13601 Purpose of Disbursement Sponsorship - health care community event Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5342 Date of Disbursement 04 / 06 / 2010 Amount of Each Disbursement this Period 2000.00 Category/ Type 004

SUBTOTAL of Disbursements This Page (optional) ▶	2414.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
The Deers Head Inn & Restaurant

Mailing Address 7552 Court St.

City Elizabethtown State NY Zip Code 12932

Purpose of Disbursement
Meet 'n Greet Event

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

007
Category/
Type

Transaction ID: SB17.5348
Date of Disbursement

04 / 05 / 2010

Amount of Each Disbursement this Period

440.00

B. Full Name (Last, First, Middle Initial)
The Post Standard

Mailing Address P. O. Box 4915

City Syracuse State NY Zip Code 13221-4915

Purpose of Disbursement
Subscription

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

001
Category/
Type

Transaction ID: SB17.5963
Date of Disbursement

06 / 10 / 2010

Amount of Each Disbursement this Period

40.24

C. Full Name (Last, First, Middle Initial)
Time Warner Cable

Mailing Address P. O. Box 2086

City Binghamton State NY Zip Code 13902

Purpose of Disbursement
Cable, Phone & Internet Services

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

001
Category/
Type

Transaction ID: SB17.5350
Date of Disbursement

04 / 06 / 2010

Amount of Each Disbursement this Period

356.52

SUBTOTAL of Disbursements This Page (optional) ▶

836.76

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 101 / 123

<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)
Doheny for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Time Warner Cable</p> <p>Mailing Address P. O. Box 2086</p> <p>City Binghamton State NY Zip Code 13902</p> <p>Purpose of Disbursement Cable, Phone & Internet Services</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5416</p> <p>Date of Disbursement 05 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 350.14</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Time Warner Cable</p> <p>Mailing Address P. O. Box 2086</p> <p>City Binghamton State NY Zip Code 13902</p> <p>Purpose of Disbursement Cable, Internet & Phone</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5533</p> <p>Date of Disbursement 06 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 707.13</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address P. O. Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.6007</p> <p>Date of Disbursement 06 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 320.40</p> <p>002 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1377.67

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB17.5470 Date of Disbursement
	Mailing Address Internal Revenue Service	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="21"/> <input type="text" value="21"/> / <input type="text" value="2010"/> <input type="text" value="2010"/>
	City Cincinnati State OH Zip Code 45999	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3103.60"/> 001 Category/ Type

B.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB17.6017 Date of Disbursement
	Mailing Address Internal Revenue Service	<input type="text" value="06"/> <input type="text" value="06"/> / <input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="2010"/> <input type="text" value="2010"/>
	City Cincinnati State OH Zip Code 45999	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2506.66"/> 001 Category/ Type

C.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB17.6019 Date of Disbursement
	Mailing Address Internal Revenue Service	<input type="text" value="06"/> <input type="text" value="06"/> / <input type="text" value="18"/> <input type="text" value="18"/> / <input type="text" value="2010"/> <input type="text" value="2010"/>
	City Cincinnati State OH Zip Code 45999	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2600.66"/> 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8210.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 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)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) UPS Store <hr/> Mailing Address 107 Court Street <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Postage Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5873 Date of Disbursement 05 / 24 / 2010
	Amount of Each Disbursement this Period 292.53
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) UPS Store <hr/> Mailing Address 107 Court Street <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Shipping documents Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5874 Date of Disbursement 05 / 24 / 2010
	Amount of Each Disbursement this Period 19.78
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) UPS Store <hr/> Mailing Address 107 Court Street <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Shipping documents Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5880 Date of Disbursement 05 / 28 / 2010
	Amount of Each Disbursement this Period 27.11
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

339.42

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)

<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)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) UPS Store <hr/> Mailing Address 107 Court Street <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Postage Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5941 Date of Disbursement 06 / 04 / 2010 <hr/> Amount of Each Disbursement this Period 41.67
B.	Full Name (Last, First, Middle Initial) UPS Store <hr/> Mailing Address 107 Court Street <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Postage Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5953 Date of Disbursement 06 / 08 / 2010 <hr/> Amount of Each Disbursement this Period 8.19
C.	Full Name (Last, First, Middle Initial) UPS Store <hr/> Mailing Address 107 Court Street <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Postage - document shipping Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5980 Date of Disbursement 06 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 40.30

SUBTOTAL of Disbursements This Page (optional) ▶

90.16

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 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)
Doheny for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) UPS Store</p> <p>Mailing Address 107 Court Street</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Postage - document shipping</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5981</p> <p>Date of Disbursement 06 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 30.35</p> <p>Category/Type 001</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) UPS Store</p> <p>Mailing Address 107 Court Street</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Postage - document shipping</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5982</p> <p>Date of Disbursement 06 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 25.15</p> <p>Category/Type 001</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) USAirway</p> <p>Mailing Address 111 W. Rio Salado Parkway</p> <p>City Tempe State AZ Zip Code 85281</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5937</p> <p>Date of Disbursement 06 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 469.40</p> <p>Category/Type 002</p>

SUBTOTAL of Disbursements This Page (optional) ▶

524.90

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) USAirway <hr/> Mailing Address 111 W. Rio Salado Parkway <hr/> City Tempe State AZ Zip Code 85281 <hr/> Purpose of Disbursement Arifare Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5938 Date of Disbursement 06 / 04 / 2010 <hr/> Amount of Each Disbursement this Period 469.40
B.	Full Name (Last, First, Middle Initial) USAirway <hr/> Mailing Address 111 W. Rio Salado Parkway <hr/> City Tempe State AZ Zip Code 85281 <hr/> Purpose of Disbursement Arifare Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5939 Date of Disbursement 06 / 04 / 2010 <hr/> Amount of Each Disbursement this Period 112.70
C.	Full Name (Last, First, Middle Initial) USAirway <hr/> Mailing Address 111 W. Rio Salado Parkway <hr/> City Tempe State AZ Zip Code 85281 <hr/> Purpose of Disbursement Arifare Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5955 Date of Disbursement 06 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 305.40

SUBTOTAL of Disbursements This Page (optional) ▶

887.50

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 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)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) USAirway Mailing Address 111 W. Rio Salado Parkway City Tempe State AZ Zip Code 85281 Purpose of Disbursement Arifare Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5956 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period 152.70
B.	Full Name (Last, First, Middle Initial) US Post Office Mailing Address 45 Hudson Avenue City Albany State NY Zip Code 12207 Purpose of Disbursement Postage - document shipping Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5987 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 0	Amount of Each Disbursement this Period 36.60
C.	Full Name (Last, First, Middle Initial) US Post Office Mailing Address 45 Hudson Avenue City Albany State NY Zip Code 12207 Purpose of Disbursement Postage - document shipping Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6005 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 37.25

SUBTOTAL of Disbursements This Page (optional) ▶

226.55

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 108 / 123

<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)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Nick Vaughn <hr/> Mailing Address 629 Patterson Street <hr/> City Ogdensburg State NY Zip Code 13669 <hr/> Purpose of Disbursement Transportation Director Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5398 Date of Disbursement <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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">2500.00</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	0	2500.00	001
M	M	/	D	D	/	Y	Y	Y	Y															
0	5		0	4		2	0	1	0															
2500.00																								
001																								
B.	Full Name (Last, First, Middle Initial) Mr. Nick Vaughn <hr/> Mailing Address 629 Patterson Street <hr/> City Ogdensburg State NY Zip Code 13669 <hr/> Purpose of Disbursement \$120 Travel and 41.30 Meals Reimbursement Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5406 Date of Disbursement <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>5</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">161.30</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">002</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	1	0	161.30	002
M	M	/	D	D	/	Y	Y	Y	Y															
0	5		0	7		2	0	1	0															
161.30																								
002																								
C.	Full Name (Last, First, Middle Initial) Mr. Nick Vaughn <hr/> Mailing Address 629 Patterson Street <hr/> City Ogdensburg State NY Zip Code 13669 <hr/> Purpose of Disbursement Gross Payroll 1153.85 w/h 264.62 Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5458 Date of Disbursement <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>5</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">889.23</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	1	0	889.23	001
M	M	/	D	D	/	Y	Y	Y	Y															
0	5		0	7		2	0	1	0															
889.23																								
001																								

SUBTOTAL of Disbursements This Page (optional) ▶

3550.53

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Nick Vaughn</p> <p>Mailing Address 629 Patterson Street</p> <p>City Ogdensburg State NY Zip Code 13669</p> <p>Purpose of Disbursement Reimburse travel/meals expense</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5446</p> <p>Date of Disbursement 05 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 195.86</p> <p>Category/Type 002</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Nick Vaughn</p> <p>Mailing Address 629 Patterson Street</p> <p>City Ogdensburg State NY Zip Code 13669</p> <p>Purpose of Disbursement Gross Payroll 1346.15 Transportation Coordinator</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5465</p> <p>Date of Disbursement 05 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1024.79</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Nick Vaughn</p> <p>Mailing Address 629 Patterson Street</p> <p>City Ogdensburg State NY Zip Code 13669</p> <p>Purpose of Disbursement 6/1/10 Travel expense NYC</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5477</p> <p>Date of Disbursement 06 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 97.11</p> <p>Category/Type 002</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1317.76

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Nick Vaughn</p> <p>Mailing Address 629 Patterson Street</p> <p>City Ogdensburg State NY Zip Code 13669</p> <p>Purpose of Disbursement Gross Payroll 1250 w/d 292.99 Transportation Coordinator</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.6014</p> <p>Date of Disbursement 06 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 957.01</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Nick Vaughn</p> <p>Mailing Address 629 Patterson Street</p> <p>City Ogdensburg State NY Zip Code 13669</p> <p>Purpose of Disbursement Reimburse 6/9/10 travel expense</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5498</p> <p>Date of Disbursement 06 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 33.95</p> <p>Category/Type 002</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Nick Vaughn</p> <p>Mailing Address 629 Patterson Street</p> <p>City Ogdensburg State NY Zip Code 13669</p> <p>Purpose of Disbursement Reimburse 6/8 travel expenses</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5504</p> <p>Date of Disbursement 06 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 152.62</p> <p>Category/Type 002</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1143.58

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 111 / 123

<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)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Nick Vaughn</p> <p>Mailing Address 629 Patterson Street</p> <p>City Ogdensburg State NY Zip Code 13669</p> <p>Purpose of Disbursement Reimburse travel for 6/6 and 6/17/10</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5518</p> <p>Date of Disbursement 06 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 108.42</p> <p>Category/Type 002</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Nick Vaughn</p> <p>Mailing Address 629 Patterson Street</p> <p>City Ogdensburg State NY Zip Code 13669</p> <p>Purpose of Disbursement Gross Payroll 1250 w/d 292.99 Transportation Coordinator</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.6024</p> <p>Date of Disbursement 06 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 957.01</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Victory Promotions</p> <p>Mailing Address 39 Main Street</p> <p>City Canton State NY Zip Code 13617</p> <p>Purpose of Disbursement Campaign Logo Imprinted Marketing Materials - footballs</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5529</p> <p>Date of Disbursement 06 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type 006</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3565.43

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Vona's Restaurant <hr/> Mailing Address 9 Willow St. <hr/> City Oswego State NY Zip Code 13126 <hr/> Purpose of Disbursement Campaign Kickoff Announcement Event Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5346 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0	Amount of Each Disbursement this Period 336.02
B.	Full Name (Last, First, Middle Initial) Walmart <hr/> Mailing Address 20823 State Route 3 <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Supplies Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5798 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period 11.61
C.	Full Name (Last, First, Middle Initial) Walmart <hr/> Mailing Address 20823 State Route 3 <hr/> City Watertown State NY Zip Code 13601 <hr/> Purpose of Disbursement Office supplies Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5806 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 1 0	Amount of Each Disbursement this Period 55.58

SUBTOTAL of Disbursements This Page (optional)	403.21
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Walmart <hr/> Mailing Address 20823 State Route 3 <hr/> City State Zip Code Watertown NY 13601 <hr/> Purpose of Disbursement Supplies Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5945 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 1 0
	Amount of Each Disbursement this Period 365.70
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Walmart <hr/> Mailing Address 20823 State Route 3 <hr/> City State Zip Code Watertown NY 13601 <hr/> Purpose of Disbursement Supplies Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5946 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 1 0
	Amount of Each Disbursement this Period 168.05
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Walmart <hr/> Mailing Address 407 County Road 3 <hr/> City State Zip Code Plattsburgh NY 12901 <hr/> Purpose of Disbursement Supplies Candidate Name Doheny for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5977 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 169.57
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	703.32
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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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)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Watertown Daily Times</p> <p>Mailing Address 260 Washington St.</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Advertisements</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5522</p> <p>Date of Disbursement MM / DD / YYYY 06 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 7500.00</p> <p>Category/Type 012</p>
<p>B. Full Name (Last, First, Middle Initial) Frank Marshall Weir</p> <p>Mailing Address 736 Ball Ave.</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Campaign Mgr Assistant</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5370</p> <p>Date of Disbursement MM / DD / YYYY 04 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Frank Marshall Weir</p> <p>Mailing Address 736 Ball Ave.</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Plattsburgh Travel reimbursements</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5405</p> <p>Date of Disbursement MM / DD / YYYY 05 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 199.78</p> <p>Category/Type 002</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10199.78

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Frank Marshall Weir

Transaction ID: SB17.5459
Date of Disbursement

Mailing Address 736 Ball Ave.

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

1041.65

Purpose of Disbursement
Gross Payroll 1153.85 w/h 112.20 - Campaign Mgr Assistant

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Frank Marshall Weir

Transaction ID: SB17.5421
Date of Disbursement

Mailing Address 736 Ball Ave.

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

205.70

Purpose of Disbursement
The Deer's Head Inn Event Expense Reimbursement

007

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Frank Marshall Weir

Transaction ID: SB17.5422
Date of Disbursement

Mailing Address 736 Ball Ave.

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

369.00

Purpose of Disbursement
Mileage Reimbursement

002

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1616.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Frank Marshall Weir

Transaction ID: SB17.5445
Date of Disbursement

Mailing Address 736 Ball Ave.

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	0

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
Campaign Manager Assistant

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

B.

Full Name (Last, First, Middle Initial)
Frank Marshall Weir

Transaction ID: SB17.5466
Date of Disbursement

Mailing Address 736 Ball Ave.

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

1207.89

Purpose of Disbursement
Gross 1346.15 w/h 138.26 Campaign Mgr Assistant

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

C.

Full Name (Last, First, Middle Initial)
Frank Marshall Weir

Transaction ID: SB17.6015
Date of Disbursement

Mailing Address 736 Ball Ave.

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	0

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

1124.77

Purpose of Disbursement
Gross 1250.00 w/h 1125.23 Campaign Mgr Assistant

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

SUBTOTAL of Disbursements This Page (optional) ▶

3582.66

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Frank Marshall Weir

Transaction ID: SB17.5519
Date of Disbursement

Mailing Address 736 Ball Ave.

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	0

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

96.00

Purpose of Disbursement
Reimburse 6/6 & 6/13/10 travel

002

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

B.

Full Name (Last, First, Middle Initial)
Frank Marshall Weir

Transaction ID: SB17.6025
Date of Disbursement

Mailing Address 736 Ball Ave.

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	0

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

1124.77

Purpose of Disbursement
Gross 1250.00 w/h 1125.23 Campaign Mgr Assistant

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

C.

Full Name (Last, First, Middle Initial)
Mr. Graham Wise

Transaction ID: SB17.5334
Date of Disbursement

Mailing Address 776 S. Massey Street

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	0

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
Campaign Manager

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

SUBTOTAL of Disbursements This Page (optional) ▶

4720.77

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Graham Wise

Transaction ID: SB17.5373
Date of Disbursement

Mailing Address 776 S. Massey Street

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
Campaign Mgr

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

B.

Full Name (Last, First, Middle Initial)
Mr. Graham Wise

Transaction ID: SB17.5391
Date of Disbursement

Mailing Address 776 S. Massey Street

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

230.96

Purpose of Disbursement
Reimburse 4/27/10 Travel Expenses

002

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

C.

Full Name (Last, First, Middle Initial)
Mr. Graham Wise

Transaction ID: SB17.5407
Date of Disbursement

Mailing Address 776 S. Massey Street

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

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
Campaign Manager

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

SUBTOTAL of Disbursements This Page (optional) ▶

7230.96

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Graham Wise</p> <p>Mailing Address 776 S. Massey Street</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Campaign Manager</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5447</p> <p>Date of Disbursement 05 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 3500.00</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Graham Wise</p> <p>Mailing Address 776 S. Massey Street</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Campaign Manager Gross Pay 3500 w/d 844.2</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.6016</p> <p>Date of Disbursement 06 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 2655.80</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Graham Wise</p> <p>Mailing Address 776 S. Massey Street</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Campaign Manager Gross Pay 3500 w/d 844.2</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.6026</p> <p>Date of Disbursement 06 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 2655.80</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8811.60

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

358990.34

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Daniel Krueger

Transaction ID: SB20A.6031
Date of Disbursement

Mailing Address 260 Park Avenue, Apt 6-I

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

City State Zip Code
New York NY 10010

Amount of Each Disbursement this Period

9800.00

Purpose of Disbursement
Stop Payment of duplicate contribution check

--

Candidate Name
Doheny for Congress

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas Lauria

Transaction ID: SB20A.5506
Date of Disbursement

Mailing Address 200 South Biscayne Blvd
Suite 4900

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

City State Zip Code
Miami FL 33131

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement
Reimburse 2009 contribution - replaces check #333 7/30/09

010

Candidate Name
Doheny for Congress

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

14600.00

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

14600.00

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
Doheny for Congress

Transaction ID: SC/10.4118

LOAN SOURCE Full Name (Last, First, Middle Initial)
Matthew Doheny - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼
Special-Primary

Mailing Address 303 Paddock Street

City Watertown State NY ZIP Code 13601

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500000.00	0.00	500000.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="500000.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
Doheny for Congress

Transaction ID: SC/10.5070

LOAN SOURCE Full Name (Last, First, Middle Initial)
Matthew Doheny - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 303 Paddock Street

City Watertown State NY ZIP Code 13601

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000.00	0.00	150000.00

TERMS

Date Incurred: M M 0 1 D D 1 5 Y Y Y Y 2 0 1 0 Date Due: 11/10/2010 Interest Rate: 0.0000 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

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: []
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) ► 150000.00

TOTALS This Period (last page in this line only) ► []

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

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
Doheny for Congress

Transaction ID: SC/10.5725

LOAN SOURCE Full Name (Last, First, Middle Initial)
Matthew Doheny - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 303 Paddock Street

City Watertown State NY ZIP Code 13601

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred: M M 06 D D 25 Y Y Y Y 2010 Date Due: 11/30/10 Interest Rate: 0.0000 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

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:
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)	▶	100000.00
TOTALS This Period (last page in this line only)	▶	750000.00

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