

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

PETE KING FOR CONGRESS COMMITTEE

ADDRESS (number and street)
▼

P.O. Box 1428

☐Check if different
than previously
reported. (ACC)

Seaford

NY

11783

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00272211

3. IS THIS
REPORT ☐NEW
(N)

OR

☒AMENDED
(A)

NY

3

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

07

01

2005

through

09

30

2005

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

PK

Signature of Treasurer

Electronically Filed by PK

Date

05

19

2006

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

PETE KING FOR CONGRESS COMMITTEE

Report Covering the Period:

From:

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

To:

M M
0 9D D
3 0Y Y Y Y
2 0 0 5

	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)).....	59597.21	161927.21
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	59597.21	161927.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	15719.85	155610.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4500.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	15719.85	151110.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	863921.16	
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).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

PETE KING FOR CONGRESS COMMITTEE

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	5

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).....

24624.21

87334.21

(ii) Unitemized.....

14923.00

17043.00

(iii) TOTAL of contributions

39547.21

104377.21

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

20050.00

57550.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)

59597.21

161927.21

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

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

0.00

0.00

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

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

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

0.00

4500.00

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)..... ▶**

59597.21

166427.21

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15719.85	155610.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	550.00	10925.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	1800.00	3300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	18069.85	169835.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	822393.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	59597.21
25. SUBTOTAL (add Line 23 and Line 24).....	881991.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	18069.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	863921.16

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

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

FOR LINE NUMBER: PAGE 5 / 38

(check only one)

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

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

NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Doyle Bartlett		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 609 Oakley Place		Transaction ID: SA11A1.13773
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Smith Free Group	Occupation Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Marc Bell		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 6800 Broken Sound Parkway NW Sui		Transaction ID: SA11A1.13782
City Boca Raton	State FL	Zip Code 33487
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer marc bell capital partners	Occupation managing director	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Lynne Brown		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 29 Washington Square West Apt. 16		Transaction ID: SA11A1.13789
City New York	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NYU	Occupation Administrator	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 6 / 38

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

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

Mohid Choudhury

Mailing Address 90-58 176th Street Apt. 1

City State Zip Code
 Jamaica NY 11432

FEC ID number of contributing
federal political committee.

C

Name of Employer
Remax International

Occupation
Agent

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 3 / 2 0 0 5

Transaction ID: SA11A1.13951

Amount of Each Receipt this Period

440.00

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

B.

Full Name (Last, First, Middle Initial)

Clare Coleman

Mailing Address 1 Astor Place Apt. 5U

City State Zip Code
 New York NY 10003

FEC ID number of contributing
federal political committee.

C

Name of Employer
NYU

Occupation
Director CCPR Program Development

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.13786

Amount of Each Receipt this Period

250.00

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

C.

Full Name (Last, First, Middle Initial)

Mohiuddin Dewan

Mailing Address 40-27 62nd Street

City State Zip Code
 Woodside NY 11377

FEC ID number of contributing
federal political committee.

C

Name of Employer
Biorrdi Corp.

Occupation
Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 3 / 2 0 0 5

Transaction ID: SA11A1.13926

Amount of Each Receipt this Period

710.00

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

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Gilda Ecroyd		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 4 Morris Place		Transaction ID: SA11A1.13774
City North Caldwell	State NJ	Zip Code 07006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer New York University	Occupation Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

B. Full Name (Last, First, Middle Initial) Peter Gleason, Esq.		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5
Mailing Address 53 North Moore Street Apt. 3C		Transaction ID: SA11A1.13885
City New York	State NY	Zip Code 10013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Levine & Gilbert	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

C. Full Name (Last, First, Middle Initial) Linda Gosden Robinson, Esq.		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 1345 Avenue of Americas 4th Floor		Transaction ID: SA11A1.13781
City New York	State NY	Zip Code 10105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Robinson Lerer & Montgome-ry	Occupation attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Muhammed Hanif		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5
Mailing Address 3 Avenue C		Transaction ID: SA11A1.13953
City Brooklyn	State NY	Zip Code 11218
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Falco Construction	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Rehana Hanif		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5
Mailing Address Bad Address		Transaction ID: SA11A1.13952
City Brooklyn	State NY	Zip Code 11121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Remax International	Occupation agent	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Amirul Hoque		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5
Mailing Address 448 Eldert Lane		Transaction ID: SA11A1.13954
City Brooklyn	State NY	Zip Code 11208
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Physician	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Alicia Hurley Mailing Address 192 Bleecker Street #12 City State Zip Code New York NY 10012 FEC ID number of contributing federal political committee. C Name of Employer NYU- Office of Federal Policy Occupation Director Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13784 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Benjamin Klemanowicz, Esq. Mailing Address 100 Hilton Avenue #610 City State Zip Code Garden City NY 11530 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.14029 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Elaine Langone Mailing Address 375 Park Avenue #2205 City State Zip Code New York NY 10152 FEC ID number of contributing federal political committee. C Name of Employer homemaker Occupation homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13778 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		2250.00
TOTAL This Period (last page this line number only) ▶		

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

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

FOR LINE NUMBER: PAGE 10 / 38

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Elaine Langone Mailing Address 375 Park Avenue #2205 City State Zip Code New York NY 10152 FEC ID number of contributing federal political committee. C Name of Employer Occupation homemaker homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13779 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Kenneth Langone Mailing Address 375 Park Avenue #2205 City State Zip Code New York NY 10152 FEC ID number of contributing federal political committee. C Name of Employer Occupation Invameda Associates President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2944.21		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13777 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Kenneth Langone Mailing Address 375 Park Avenue #2205 City State Zip Code New York NY 10152 FEC ID number of contributing federal political committee. C Name of Employer Occupation Invameda Associates President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2944.21		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13776 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Kenneth Langone Mailing Address 375 Park Avenue #2205 City New York State NY Zip Code 10152 FEC ID number of contributing federal political committee. C Name of Employer Invameda Associates Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2944.21		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 2 / 2 0 0 5 Transaction ID: SA11A1.13790 Amount of Each Receipt this Period 944.21 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Edward Long Mailing Address 430 North Jackson Street City Arlington State VA Zip Code 22201 FEC ID number of contributing federal political committee. C Name of Employer information requested Occupation information requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13775 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) John Mahon, Esq. Mailing Address 3460 Silverton Avenue City Wantagh State NY Zip Code 11793 FEC ID number of contributing federal political committee. C Name of Employer Mahon Mahon & Mahon Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13990 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)**2194.21****TOTAL** This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Harry Malhotra		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 2 / 2 0 0 5
Mailing Address 21 Holman Blvd.		Transaction ID: SA11A1.13961
City Hicksville	State NY	Zip Code 11801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer E Wireless	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

B. Full Name (Last, First, Middle Initial) Golam Mehraj		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5
Mailing Address 61-17 Woodside Avenue 5E		Transaction ID: SA11A1.13928
City Woodside	State NY	Zip Code 11377
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Royal Health Care	Occupation Outreach Coordinator	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

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

C. Full Name (Last, First, Middle Initial) Herman Merinoff		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 19-50 48th Street		Transaction ID: SA11A1.13993
City Astoria	State NY	Zip Code 11105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Charmer Industries	Occupation Chairman of the Board	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Alfred Osterland

Mailing Address Post Office Box 2424

City State Zip Code
 North Babylon NY 11703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Long Beach Medical Center

Occupation
Chairman

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 1 3 / 2 0 0 5

Transaction ID: SA11A1.13920

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

B. Andrall Pearson

Mailing Address 41 Meadow Wood Drive

City State Zip Code
 Greenwich CT 06830

FEC ID number of contributing
federal political committee.

C

Name of Employer
Yum Brands

Occupation
Director

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11A1.13780

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

C. Carol Pinto

Mailing Address 199 Montecito Crescent

City State Zip Code
 Melville NY 11747

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 1 3 / 2 0 0 5

Transaction ID: SA11A1.13997

Amount of Each Receipt this Period

500.00

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

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Patrick Pinto Mailing Address 20 Somerset Drive City State Zip Code Holbrook NY 11741 FEC ID number of contributing federal political committee. C Name of Employer Oxford Management Systems Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 5 Transaction ID: SA11A1.13987 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Patrick Pinto Mailing Address 20 Somerset Drive City State Zip Code Holbrook NY 11741 FEC ID number of contributing federal political committee. C Name of Employer Oxford Management Systems Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13998 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Patrick Pinto Mailing Address 20 Somerset Drive City State Zip Code Holbrook NY 11741 FEC ID number of contributing federal political committee. C Name of Employer Oxford Management Systems Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13770 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶			750.00
TOTAL This Period (last page this line number only) ▶			

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

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

FOR LINE NUMBER: PAGE 15 / 38

(check only one)

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Richard Pinto Mailing Address 199 Montecito Crescent City State Zip Code Melville NY 11747 FEC ID number of contributing federal political committee. C Name of Employer retired Occupation retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13769 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Eric Rackow Mailing Address 60 Franklin Road City State Zip Code Scarsdale NY 10583 FEC ID number of contributing federal political committee. C Name of Employer NYU Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13788 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mohammad Rahim Mailing Address 1496 St. Lawrence Avenue City State Zip Code Bronx NY 10462 FEC ID number of contributing federal political committee. C Name of Employer Madina Grocery Occupation Owner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13944 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) E. John Rosenwald, Jr. Mailing Address 944 Fifth Avenue City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. C Name of Employer Bears Stern Occupation Investment Banker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13783 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Dhanonjoy Saha Mailing Address 5 Wild Flower Lane City Simsbury State CT Zip Code 06092 FEC ID number of contributing federal political committee. C Name of Employer Physician Occupation Self Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13950 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Robert Salvatico Mailing Address 85 Tenth Street City Garden City State NY Zip Code 11530 FEC ID number of contributing federal political committee. C Name of Employer information requested Occupation information requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13996 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 17 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Shoraf Sarker Mailing Address 91-30 221st Place City Queens Village State NY Zip Code 11428 FEC ID number of contributing federal political committee. C Name of Employer SSNT Real Estate Occupation Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1030.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.13925 Amount of Each Receipt this Period 530.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Michael Slade Mailing Address 114 Piping Rock Road City Mattinecock State NY Zip Code 11560 FEC ID number of contributing federal political committee. C Name of Employer NBTY Inc. Occupation Senior Vice President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 5 Transaction ID: SA11A1.13992 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Elizabeth Wheatley Mailing Address 4061 Burke Court City Seaford State NY Zip Code 11783 FEC ID number of contributing federal political committee. C Name of Employer Town of Hemstead Occupation Clerk Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5 Transaction ID: SA11A1.14013 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		1780.00
TOTAL This Period (last page this line number only) ▶		24624.21

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Local 138 138A & 138B International Union of Opera

Mailing Address 137 Gazza Blvd.

City State Zip Code
 Farmingdale NY 11735

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11C.13989

Amount of Each Receipt this Period

500.00

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

Full Name (Last, First, Middle Initial)

B. International Union of Operating Engineers PAC

Mailing Address 1125 17th Street NW

City State Zip Code
 Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11C.13988

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

C. TITLE INDUSTRY POLITICAL ACTION COMMITTEE

Mailing Address 1828 L STREET NW SUITE 705

City State Zip Code
 WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11C.13767

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 38

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) CULAC CUPAC		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 601 Pennsylvania Avenue NW South Bldg. Suite 600		Transaction ID: SA11C.13766
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) CULAC CUPAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5
Mailing Address 601 Pennsylvania Avenue NW South Bldg. Suite 600		Transaction ID: SA11C.13964
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

C. Full Name (Last, First, Middle Initial) UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNI		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 1775 K STREET NW C00297796		Transaction ID: SA11C.13768
City WASHINGTON State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <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)

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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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Amalgamated Transit Union-COPE

Mailing Address 5025 Wisconsin Avenue NW

City State Zip Code
 Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11C.13762

Amount of Each Receipt this Period

2500.00

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

Full Name (Last, First, Middle Initial)

B. AMERICAN HOSPITAL ASSOCIATION POLITICAL ACTION COM

Mailing Address 325 SEVENTH STREET NW SUITE 700

City State Zip Code
 WASHINGTON DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 2 / 2 0 0 5

Transaction ID: SA11C.13962

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

C. AMERICAN HOSPITAL ASSOCIATION POLITICAL ACTION COM

Mailing Address 325 SEVENTH STREET NW SUITE 700

City State Zip Code
 WASHINGTON DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11C.13991

Amount of Each Receipt this Period

2000.00

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

SUBTOTAL of Receipts This Page (optional)

5500.00

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 21 / 38

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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Lent & Scrivner PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address Post Office Box 2715		Transaction ID: SA11C.13763
City Arlington	State VA	Zip Code 22202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

B. Full Name (Last, First, Middle Initial) IRONWORKERS POLITICAL ACTION LEAGUE		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 5
Mailing Address 1750 NY AVE NW SUITE 400		Transaction ID: SA11C.13995
City WASHINGTON	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

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

C. Full Name (Last, First, Middle Initial) CABLEVISION SYSTEMS CORPORATION POLITICAL ACTION C		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 111 STEWART AVE C00197863		Transaction ID: SA11C.13764
City BETHPAGE	State NY	Zip Code 11714
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

VEN - PAC

Mailing Address Post Office Box 70002

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11C.13771

Amount of Each Receipt this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)

Sonnenschein Political Action Committee

Mailing Address 1301 K Street NW Suite 600 East

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: SA11C.13765

Amount of Each Receipt this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)

Sonnenschein Political Action Committee

Mailing Address 1301 K Street NW Suite 600 East

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11C.13986

Amount of Each Receipt this Period

2500.00

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

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial) Bethpage PAC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 5
Mailing Address 899 South Oyster Bay Road		Transaction ID: SA11C.13963
City State Zip Code Bethpage NY 11714	Amount of Each Receipt this Period 800.00	
FEC ID number of contributing federal political committee. C		
Name of Employer 	Occupation 	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

20050.00

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Mr. Kenneth Langone

Mailing Address 375 Park Avenue #2205

City State Zip Code
New York NY 10152

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.-13790

Date of Disbursement

/ /

Amount of Each Disbursement this Period

944.21

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

Full Name (Last, First, Middle Initial)

B. Bar Harbour Gallery

Mailing Address 1011 Park Boulevard

City State Zip Code
Massapequa Park NY 11792

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12052

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.96

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

framing

Full Name (Last, First, Middle Initial)

C. Ford Motor Credit

Mailing Address Post Office Box 220564

City State Zip Code
Pittsburgh PA 15257

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12071

Date of Disbursement

/ /

Amount of Each Disbursement this Period

505.00

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

car payment

SUBTOTAL of Disbursements This Page (optional)

1650.17

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Ford Motor Credit

Mailing Address Post Office Box 220564

City Pittsburgh State PA Zip Code 15257

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12053

Date of Disbursement

07 / 19 / 2005

Amount of Each Disbursement this Period

505.00

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

car payment

Full Name (Last, First, Middle Initial)

B. Ford Motor Credit

Mailing Address Post Office Box 220564

City Pittsburgh State PA Zip Code 15257

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12065

Date of Disbursement

08 / 19 / 2005

Amount of Each Disbursement this Period

505.00

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

car payment

Full Name (Last, First, Middle Initial)

C. Petty Cash

Mailing Address PO Box 1428

City Seaford State NY Zip Code 11783

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12075

Date of Disbursement

09 / 16 / 2005

Amount of Each Disbursement this Period

300.00

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

petty cash

SUBTOTAL of Disbursements This Page (optional)

1310.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Sean King

Mailing Address 1442 Roth Road

City
Seaford

State
NY

Zip Code
11783

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12083

Date of Disbursement

/ /

Amount of Each Disbursement this Period

346.90

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

airline ticket

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 64268

City
Baltimore

State
MD

Zip Code
21264

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12069

Date of Disbursement

/ /

Amount of Each Disbursement this Period

305.83

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

cell phone

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 64268

City
Baltimore

State
MD

Zip Code
21264

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12058

Date of Disbursement

/ /

Amount of Each Disbursement this Period

432.63

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

cell phone

SUBTOTAL of Disbursements This Page (optional)

1085.36

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 64268

City
Baltimore

State
MD

Zip Code
21264

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12079

Date of Disbursement

/ /

Amount of Each Disbursement this Period

43.85

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

cell phone

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address PO Box 1100

City
Albany

State
NY

Zip Code
12250

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12068

Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.11

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

telephone charges

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address PO Box 1100

City
Albany

State
NY

Zip Code
12250

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12064

Date of Disbursement

/ /

Amount of Each Disbursement this Period

43.71

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

telephone charges

SUBTOTAL of Disbursements This Page (optional)

122.67

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 1100

City
Albany

State
NY

Zip Code
12250

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12077

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.75

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

telephone charges

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address PO Box 1100

City
Albany

State
NY

Zip Code
12250

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12078

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.75

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

telephone charges

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address PO Box 1100

City
Albany

State
NY

Zip Code
12250

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12057

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.68

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

telephone charges

SUBTOTAL of Disbursements This Page (optional)

104.18

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB17.12073

Date of Disbursement

/ /

Amount of Each Disbursement this Period

43.76

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

telephone charges

Full Name (Last, First, Middle Initial)

B. American Express Centurion Bank

Mailing Address Suite 0002

City Chicago State IL Zip Code 60679

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB17.12076

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5294.27

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

credit card

Full Name (Last, First, Middle Initial)

C. Barnes and Noble

Mailing Address Sunrise Highway

City Massapequa State NY Zip Code 11762

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB17.12093

Date of Disbursement

/ /

Amount of Each Disbursement this Period

528.21

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

[MEMO ITEM]
books

SUBTOTAL of Disbursements This Page (optional)

5338.03

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Galleria Ristorante

Mailing Address Post Avenue

City State Zip Code
 Westbury NY 11590

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12087

Date of Disbursement

/ /

Amount of Each Disbursement this Period

311.30

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

[MEMO ITEM]

meal

Full Name (Last, First, Middle Initial)

B. Getty Gas

Mailing Address Jerusalem Avenue

City State Zip Code
 Seaford NY 11783

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12094

Date of Disbursement

/ /

Amount of Each Disbursement this Period

84.20

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

[MEMO ITEM]

gas

Full Name (Last, First, Middle Initial)

C. New York Institute

Mailing Address 211 East 42nd #2402

City State Zip Code
 New York NY 10017

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12102

Date of Disbursement

/ /

Amount of Each Disbursement this Period

648.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Phoenix Park Hotel

Mailing Address North Capitol Street

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12105

Date of Disbursement

07 / 19 / 2005

Amount of Each Disbursement this Period

2486.91

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

[MEMO ITEM]

hotel room

Full Name (Last, First, Middle Initial)

B. The Monocle

Mailing Address Capitol Hill

City Washington State DC Zip Code 20510

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12097

Date of Disbursement

07 / 19 / 2005

Amount of Each Disbursement this Period

220.90

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

[MEMO ITEM]

meals

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 64268

City Baltimore State MD Zip Code 21264

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12103

Date of Disbursement

07 / 19 / 2005

Amount of Each Disbursement this Period

119.85

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

[MEMO ITEM]

cell phone

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Getty Gas

Mailing Address Jerusalem Avenue

City
Seaford

State
NY

Zip Code
11783

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12115

Date of Disbursement

/ /

Amount of Each Disbursement this Period

36.80

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

[MEMO ITEM]

gas

Full Name (Last, First, Middle Initial)

B. American Express Centurion Bank

Mailing Address Suite 0002

City
Chicago

State
IL

Zip Code
60679

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12117

Date of Disbursement

/ /

Amount of Each Disbursement this Period

283.90

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

credit card

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address JFK Airport

City
New York

State
NY

Zip Code
11111

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12118

Date of Disbursement

/ /

Amount of Each Disbursement this Period

283.90

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

[MEMO ITEM]

airline ticket

SUBTOTAL of Disbursements This Page (optional)

283.90

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. American Express Centurion Bank

Mailing Address Suite 0002

City
Chicago

State
IL

Zip Code
60679

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.12120

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

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

[MEMO ITEM]

annual fee/membership

Full Name (Last, First, Middle Initial)

B. American Express Centurion Bank

Mailing Address Suite 0002

City
Chicago

State
IL

Zip Code
60679

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.12119

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4702.27

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

credit card

Full Name (Last, First, Middle Initial)

C. Amazon.com

Mailing Address 1050 South Columbia Avenue

City
Campbellsville

State
KY

Zip Code
42718

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.12127

Date of Disbursement

/ /

Amount of Each Disbursement this Period

395.76

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

[MEMO ITEM]

books

SUBTOTAL of Disbursements This Page (optional)

4702.27

TOTAL This Period (last page this line number only)

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

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

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. BA Mobile

Mailing Address Sunrise Highway

City State Zip Code
 Massapequa NY 11758

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.12138

Date of Disbursement

/ /

Amount of Each Disbursement this Period

271.54

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

[MEMO ITEM]

telephone

Full Name (Last, First, Middle Initial)

B. Barnes and Noble

Mailing Address Sunrise Highway

City State Zip Code
 Massapequa NY 11762

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.12125

Date of Disbursement

/ /

Amount of Each Disbursement this Period

17.38

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

[MEMO ITEM]

books

Full Name (Last, First, Middle Initial)

C. First Impressions

Mailing Address 25 Adams Court

City State Zip Code
 Plainview NY 11803

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.12139

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1631.25

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

[MEMO ITEM]

printing

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Get Smart Photo Products

Mailing Address 333 9th Avenue

City State Zip Code
 New York NY 10003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12133

Date of Disbursement

/ /

Amount of Each Disbursement this Period

251.79

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

[MEMO ITEM]

photo supplies/camera repair

B. Getty Gas

Mailing Address Jerusalem Avenue

City State Zip Code
 Seaford NY 11783

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12123

Date of Disbursement

/ /

Amount of Each Disbursement this Period

190.80

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

[MEMO ITEM]

gas

C. US Postmaster Massapequa Pk

Mailing Address Merrick Road

City State Zip Code
 Massapequa Park NY 11762

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB17.12137

Date of Disbursement

/ /

Amount of Each Disbursement this Period

740.00

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

[MEMO ITEM]

postage

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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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)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 64268

City
Baltimore

State
MD

Zip Code
21264

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB17.12135

Date of Disbursement

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

Amount of Each Disbursement this Period

119.21

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

[MEMO ITEM]

cell phone charges

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

14596.58

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

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Nassau County Republican Committee

Mailing Address 164 Post Avenue

City Westbury State NY Zip Code 11590

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB18.12108

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

ticket purchase

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Nassau County Republican Committee

Mailing Address 164 Post Avenue

City
Westbury

State
NY

Zip Code
11590

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21.12110

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	0	5

Amount of Each Disbursement this Period

1400.00

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

ticket purchase

SUBTOTAL of Disbursements This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

1400.00