

**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

McNulty for Congress

ADDRESS (number and street)

P.O. Box 1560

Check if different than previously reported. (ACC)

Green Island

NY

12183

2. **FEC IDENTIFICATION NUMBER**

C00230417

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT  NEW OR  AMENDED (A)

NY 21

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

11

02

2004

in the State of

NY

5. Covering Period 10 14 2004 through 11 22 2004

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 John J. McNulty III

Signature of Treasurer Electronically Filed by John J. McNulty III Date 11 28 2004

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

McNulty for Congress

Report Covering the Period: From: <sup>M M</sup> 1 0 <sup>Y Y</sup> 1 4 <sup>Y Y Y Y</sup> 2 0 0 4 To: <sup>Y M</sup> 1 1 <sup>Y Y</sup> 2 2 <sup>Y Y Y Y</sup> 2 0 0 4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a)).....	31685.00	311087.00
(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)).....	31685.00	311087.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	20674.11	240291.84
(b) Total Offsets to Operating Expenditures (from Line 14).....	390.30	957.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20283.81	239333.93
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>319619.74</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**For further information contact:**

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

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

**POST-ELECTION DETAILED  
SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

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. If the candidate participated in the general election, use this form for the 30-day Post-General report.

. If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

McNulty for Congress

Report Covering the Period: From: 

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

 To: 

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of	COLUMN C Total for																																																
11. CONTRIBUTIONS (other than loans) FROM:	<table border="0"><tr><td>M</td><td>M</td><td>J</td><td>J</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>0</td><td>2</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> <p align="center">(date of general election)</p>	M	M	J	J	Y	Y	Y	Y	1	1	0	2	2	0	0	4	<table border="0"><tr><td>M</td><td>M</td><td>D</td><td>D</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>0</td><td>3</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> <p align="center">(date after general election)</p> <p align="center">through</p> <table border="0"><tr><td>M</td><td>M</td><td>D</td><td>D</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>2</td><td>2</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> <p align="center">(last day of reporting period)</p>	M	M	D	D	Y	Y	Y	Y	1	1	0	3	2	0	0	4	M	M	D	D	Y	Y	Y	Y	1	1	2	2	2	0	0	4
M	M	J	J	Y	Y	Y	Y																																											
1	1	0	2	2	0	0	4																																											
M	M	D	D	Y	Y	Y	Y																																											
1	1	0	3	2	0	0	4																																											
M	M	D	D	Y	Y	Y	Y																																											
1	1	2	2	2	0	0	4																																											
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
1575.00																																																		
(ii) Unitemized																																																		
1110.00																																																		
(iii) Total of contributions from Individuals																																																		
2685.00	112137.00	1410.00																																																
(b) Political Party Committees																																																		
0.00	6875.00	0.00																																																
(c) Other Political Committees																																																		
29000.00	192075.00	0.00																																																

**POST-ELECTION DETAILED  
SUMMARY PAGE  
Report of Receipts and Disbursements**

FEC Form 3 (Revised 02/2003)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)	
(d) The Candidate	0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(III), (b), (c) and (d))	31665.00	311087.00	1410.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	0.00
13. LOANS:			
(a) Made or Guaranteed by the Candidate	0.00	0.00	0.00
(b) All Other Loans	0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)	390.30	957.91	390.30
15. OTHER RECEIPTS (Dividends, Interest, etc)	171.09	5426.55	171.09
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	32246.39	317471.46	1971.39

**POST ELECTION DETAILED  
SUMMARY PAGE**

Report of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Page 7

Write or Type Committee Name

McNulty for Congress

Report the covering period

From:

10 | 14 | 2004

To:

11 | 22 | 2004

**II. DISBURSEMENTS**

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
<b>17. OPERATING EXPENDITURES</b>		
20674.11	240291.84	3933.36
<b>18. TRANSFER TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN PAYMENTS</b>		
<b>(a) Of Loans Made or Guaranteed by the Candidate</b>		
0.00	0.00	0.00
<b>(b) Of All Other Loans</b>		
0.00	0.00	0.00
<b>(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )</b>		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
<b>(a) Individuals/Persons Other Than Political Committees</b>		
0.00	0.00	0.00
<b>(b) Political Party Committees</b>		
0.00	0.00	0.00

**POST ELECTION DETAILED  
SUMMARY PAGE**

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FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
(c) Other political committees (such as PACs)	0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))	0.00	0.00	0.00
21. OTHER DISBURSEMENTS	8940.00	211840.70	2240.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)	29614.11	452132.54	6173.36

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

31685.00	311087.00	1410.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

20283.81	239333.93	3543.06
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	316987.46
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 18).....	32246.39
25. SUBTOTAL (add Line 23 and Line 24) .....	349233.85
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	29614.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	319819.74

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

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

FOR LINE NUMBER: PAGE 7 / 35

(check only one)

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

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)  
McNulty for Congress

Full Name (Last, First, Middle Initial) <b>A. Gaylord Abbott</b>		Date of Receipt M / D / Y 10 / 19 / 2004
Mailing Address 3505 Hwy Rte 20 Rd 1/Box 77A		Transaction ID: 41023.C5018
City Sloansville	State NY	Zip Code 12160-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Harris Bak</b>		Date of Receipt M / D / Y 10 / 19 / 2004
Mailing Address 132 Overlook Rd.		Transaction ID: 41023.C5018
City New Rochelle	State NY	Zip Code 10804-4139
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Stoney Cohen</b>		Date of Receipt M / D / Y 11 / 11 / 2004
Mailing Address 12 Friebel Rd.		Transaction ID: 41127.C5043
City Albany	State NY	Zip Code 12208-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Requesting Information	Occupation Requesting Information	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>850.00</b>
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 8 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial) A. <u>Roberta Gutwein</u>		Date of Receipt M / D / Y 10 / 19 / 2004
Mailing Address <u>1471 North Ave.</u>		Transaction ID: <u>41023.C5017</u>
City	State	Zip Code
<u>New Rochelle</u>	<u>NY</u>	<u>10804-</u>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200.00</b>
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <b>200.00</b>	

Full Name (Last, First, Middle Initial) B. <u>Jenwan Hsu</u>		Date of Receipt M / D / Y 10 / 14 / 2004
Mailing Address <u>7009 Suzanne Lane</u>		Transaction ID: <u>41127.C5054</u>
City	State	Zip Code
<u>Schenectady</u>	<u>NY</u>	<u>12309-</u>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-75.00</b>
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <b>0.00</b>	

Full Name (Last, First, Middle Initial) C. <u>Evelyn Sagel</u>		Date of Receipt M / D / Y 11 / 17 / 2004
Mailing Address <u>One Windsor Place</u>		Transaction ID: <u>41127.C5042</u>
City	State	Zip Code
<u>Albany</u>	<u>NY</u>	<u>12209-</u>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer Requesting Information	Occupation Requesting Information	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>300.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>425.00</b>
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 9 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

Full Name (Last, First, Middle Initial) A. Kenneth B. Segel		Date of Receipt 11 / 17 / 2004
Mailing Address 1 Oakridge		Transaction ID: 41127.C5041
City Albany	State NY	Zip Code 12204-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Segel, Goldman	Occupation Attorney	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	300.00
TOTAL This Period (last page this line number only) .....	▶	1575.00

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial) <b>A. Intermagnetics General Corporation PAC</b>		Date of Receipt M / D / Y 10 / 27 / 2004
Mailing Address 855 15th Street, Metropolitan Squar Suite 460/F Street Lobby		Transaction ID: 41030.C5031
City Washington	State DC	Zip Code 20005-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Carpenters Legislative Improvement</b>		Date of Receipt M / D / Y 10 / 22 / 2004
Mailing Address Committee PAC 101 Constitution Ave., NW		Transaction ID: 41023.C5019
City Washington	State DC	Zip Code 20001-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. CWA-COPE POC</b>		Date of Receipt M / D / Y 10 / 23 / 2004
Mailing Address 501 3rd Street		Transaction ID: 41024.C5021
City Washington	State DC	Zip Code 20001-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8000.00</b>
<b>TOTAL</b> 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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(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial) <b>A. United Parcel Service PAC</b>		Date of Receipt M / D / Y 10 / 28 / 2004
Mailing Address 55 Glenlake Parkway, N.E.		Transaction ID: 41111.C5038
City Atlanta	State GA	Zip Code 30328-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. NYS Hospital and Healthcare Associations</b>		Date of Receipt M / D / Y 10 / 28 / 2004
Mailing Address Federal PAC One Empire Drive		Transaction ID: 41030.C5036
City Rensselaer	State NY	Zip Code 12144-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. National Association of Insurance</b>		Date of Receipt M / D / Y 10 / 28 / 2004
Mailing Address and Financial Advisors PAC 2901 Telstar Ct.		Transaction ID: 41028.C5028
City Falls Church	State VA	Zip Code 22042-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>6500.00</b>
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 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial) A. American Federation of State County &		Date of Receipt M / D / Y 10 / 29 / 2004
Mailing Address Municipal Employees- PEOPLE, Quali 1625 L Street, NW		Transaction ID: 41030.C5034
City Washington	State DC	Zip Code 20036-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) B. New York Life PAC		Date of Receipt M / D / Y 10 / 29 / 2004
Mailing Address 51 Madison Avenue		Transaction ID: 41030.C5033
City New York	State NY	Zip Code 10010-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. Human Rights Campaign PAC		Date of Receipt M / D / Y 10 / 29 / 2004
Mailing Address 1840 Rhode Island Avenue, NW		Transaction ID: 41030.C5037
City Washington	State DC	Zip Code 20038-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	5000.00
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 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial) <b>A. International Union of Operat. Engineers</b>		Date of Receipt M / D / Y 10 / 22 / 2004
Mailing Address Political Education Committee 1125 Seventeenth Street NW		Transaction ID: 41030.C5027
City Washington	State DC	Zip Code 20036-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Sheet Metal Workers International</b>		Date of Receipt M / D / Y 10 / 22 / 2004
Mailing Address Association Political Action League 1750 New York Ave., N.W.		Transaction ID: 41023.C5020
City Washington	State DC	Zip Code 20006-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. United Food and Commercial Workers</b>		Date of Receipt M / D / Y 10 / 27 / 2004
Mailing Address International Union, AFL-CIO/CLC 1775 K Street, N.W.		Transaction ID: 41028.C5023
City Washington	State DC	Zip Code 20008-1598
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>4000.00</b>
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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(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial) <b>A. IMPACT PAC</b>		Date of Receipt M / D / Y 10 / 28 / 2004
Mailing Address 80 Madison Ave., Ste. 1028		Transaction ID: 41028.C5025
City New York	State NY	Zip Code 10010-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. American Hospital Association PAC</b>		Date of Receipt M / D / Y 10 / 28 / 2004
Mailing Address 325 Seventh Street, N.W. #6-F		Transaction ID: 41030.C5035
City Washington	State DC	Zip Code 20004-2802
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) <b>C. American Medical Association PAC</b>		Date of Receipt M / D / Y 10 / 27 / 2004
Mailing Address 1101 Vermont Avenue, NW		Transaction ID: 41028.C5024
City Washington	State DC	Zip Code 20005-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>4500.00</b>
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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(check only one)

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

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

Full Name (Last, First, Middle Initial) A. Credit Suisse First Boston Corp.		Date of Receipt M / D / Y 10 / 16 / 2004
Mailing Address Government Action Fund 1155 21st St. NW #300		Transaction ID: 41016.C5014
City Washington	State DC	Zip Code 20036-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-1)
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼  2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	1000.00
TOTAL This Period (last page this line number only) .....	▶	29000.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full) McNulty for Congress	
Full Name (Last, First, Middle Initial) A. HSAC	
Mailing Address 148 George St	
City	State Zip Code
Green Island	NY 12183-
FEC ID number of contributing federal political committee.	<b>C</b>
Name of Employer	Occupation
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼  673.21
Date of Receipt	Transaction ID: 41127.C5055
11 / 22 / 2004	Amount of Each Receipt this Period 390.30
Offsets to Operating Expenditure Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(A)-1)	

SUBTOTAL of Receipts This Page (optional) .....	▶	390.30
TOTAL This Period (last page this line number only) .....	▶	390.30



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

Use separate schedule(s)  
 or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

Full Name (Last, First, Middle Initial) HSBC		Date of Receipt M / D / Y 11 / 22 / 2004	
Mailing Address 148 George St		Transaction ID: 41127.C5056	
City Green Island	State NY	Zip Code 12183-	Amount of Each Receipt this Period 171.09
FEC ID number of contributing federal political committee. C		Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer  Receipt For: 2004 X Primary General Other (specify) ▼	Occupation  Election Cycle-to-Date ▼ 5597.64		

SUBTOTAL of Receipts This Page (optional) .....	▶	171.09
TOTAL This Period (last page this line number only) .....	▶	171.09

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
CAMPAIGN TRAVEL/LODGING

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41028.E4294

Date of Disbursement

10 / 23 / 2004

Amount of Each Disbursement this Period

206.10

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

CAMPAIGN TRAVEL/LODGING

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
CAMPAIGN MEETINGS/TRAVEL

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41111.E4306

Date of Disbursement

11 / 02 / 2004

Amount of Each Disbursement this Period

690.33

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

CAMPAIGN MEETINGS/TRAVEL

Full Name (Last, First, Middle Initial)

C. Times Union

Mailing Address NEWS PLAZA  
Box 15000

City Albany State NY Zip Code 12212-

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41127.E4317

Date of Disbursement

11 / 16 / 2004

Amount of Each Disbursement this Period

347.00

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

SUBSCRIPTION

SUBTOTAL of Disbursements This Page (optional) ▶

1443.43

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)

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

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

Full Name (Last, First, Middle Initial)

**A. NYS Income Tax**

Mailing Address Processing Unit  
 P.O. Box 3961

City New York State NY Zip Code 10008-3961

Purpose of Disbursement  
 NYS W/H & UNEMPLOYMT. TAX

Candidate Name

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

State: District

Category/  
 Type

Transaction ID: 41028.E4278

Date of Disbursement

10 / 20 / 2004

Amount of Each Disbursement this Period

464.77

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

NYS W/H & UNEMPLOYMT. TAX

Full Name (Last, First, Middle Initial)

**B. U.S. Postmaster**

Mailing Address 137 George St

City Green Island State NY Zip Code 12183-

Purpose of Disbursement  
 CAMPAIGN MAILING

Candidate Name

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

State: District

Category/  
 Type

Transaction ID: 41028.E4280

Date of Disbursement

10 / 20 / 2004

Amount of Each Disbursement this Period

2707.87

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

CAMPAIGN MAILING

Full Name (Last, First, Middle Initial)

**C. U.S. Postmaster**

Mailing Address 137 George St

City Green Island State NY Zip Code 12183-

Purpose of Disbursement  
 STAMPS

Candidate Name

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

State: District

Category/  
 Type

Transaction ID: 41028.E4285

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

111.00

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

STAMPS

SUBTOTAL of Disbursements This Page (optional) ▶

3283.64

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)

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

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

Full Name (Last, First, Middle Initial)  
**A. U.S. Postmaster**

Mailing Address 137 George St

City Green Island State NY Zip Code 12183-

Purpose of Disbursement  
 CAMPAIGN MAILING

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41028.E4296  
 Date of Disbursement  
 10 / 25 / 2004

Amount of Each Disbursement this Period  
 1942.92

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

CAMPAIGN MAILING

Full Name (Last, First, Middle Initial)  
**B. U.S. Postmaster**

Mailing Address 137 George St

City Green Island State NY Zip Code 12183-

Purpose of Disbursement  
 STAMPS/MAILING

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41028.E4295  
 Date of Disbursement  
 10 / 25 / 2004

Amount of Each Disbursement this Period  
 250.00

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

STAMPS/MAILING

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

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement  
 PHONE CHARGES

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41028.E4272  
 Date of Disbursement  
 10 / 19 / 2004

Amount of Each Disbursement this Period  
 57.93

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

PHONE CHARGES

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **2259.85**

**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 21 / 35

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement  
PHONE CHARGES

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41028.E4299

Date of Disbursement

10 / 26 / 2004

Amount of Each Disbursement this Period

59.95

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

PHONE CHARGES

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement  
PHONE CHARGES

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41028.E4298

Date of Disbursement

10 / 26 / 2004

Amount of Each Disbursement this Period

74.77

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

PHONE CHARGES

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement  
PHONE CHARGES

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41127.E4923

Date of Disbursement

11 / 16 / 2004

Amount of Each Disbursement this Period

58.30

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

PHONE CHARGES

SUBTOTAL of Disbursements This Page (optional) ▶

193.02

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)

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

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

Full Name (Last, First, Middle Initial)  
**A. Time Warner Cable**

Mailing Address 130 Washington Ave. Ext.

City Albany State NY Zip Code 12203-5336

Purpose of Disbursement  
 INTERNET SERVICE

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: 41028.E4259  
 Date of Disbursement  
 10 / 14 / 2004

Amount of Each Disbursement this Period  
 44.95

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

INTERNET SERVICE

Full Name (Last, First, Middle Initial)  
**B. Time Warner Cable**

Mailing Address 130 Washington Ave. Ext.

City Albany State NY Zip Code 12203-5336

Purpose of Disbursement  
 INTERNET SERVICE

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: 41111.E4311  
 Date of Disbursement  
 11 / 04 / 2004

Amount of Each Disbursement this Period  
 44.95

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

INTERNET SERVICE

Full Name (Last, First, Middle Initial)  
**C. Time Warner Cable**

Mailing Address 130 Washington Ave. Ext.

City Albany State NY Zip Code 12203-5336

Purpose of Disbursement  
 INTERNET SERVICE

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: 41127.E4322  
 Date of Disbursement  
 11 / 16 / 2004

Amount of Each Disbursement this Period  
 44.95

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

INTERNET SERVICE

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **134.85**

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

Full Name (Last, First, Middle Initial)  
**A. The Mailworks**

Mailing Address 45 Prospect Ave.

City Albany State NY Zip Code 12206-

Purpose of Disbursement  
 MAILING SERVICES

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41028.E4277  
 Date of Disbursement  
 10 / 20 / 2004

Amount of Each Disbursement this Period  
 780.89

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

MAILING SERVICES

Full Name (Last, First, Middle Initial)  
**B. Fort Orange Press**

Mailing Address 11 Sand Creek Road  
 P.O. Box 828

City Albany State NY Zip Code 12201-

Purpose of Disbursement  
 CAMPAIGN POSTCARDS

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41028.E4301  
 Date of Disbursement  
 10 / 26 / 2004

Amount of Each Disbursement this Period  
 2690.76

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

CAMPAIGN POSTCARDS

Full Name (Last, First, Middle Initial)  
**C. Hills Stationery**

Mailing Address 451 Broadway

City Troy State NY Zip Code 12180-

Purpose of Disbursement  
 CAMPAIGN MATERIAL

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41028.E4273  
 Date of Disbursement  
 10 / 19 / 2004

Amount of Each Disbursement this Period  
 80.81

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

CAMPAIGN MATERIAL

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

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

**3541.06**

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

**A.** Full Name (Last, First, Middle Initial)  
 Hills Stationery

Mailing Address 451 Broadway

City Troy State NY Zip Code 12180-

Purpose of Disbursement  
 CAMPAGIN OFC. SUPPLIES

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41111.E4314  
 Date of Disbursement  
 11 / 09 / 2004

Amount of Each Disbursement this Period  
 25.27

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

CAMPAGIN OFC. SUPPLIES

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

Mailing Address 400 Broadway

City Troy State NY Zip Code 12180-0008

Purpose of Disbursement  
 STAMPS

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41111.E4308  
 Date of Disbursement  
 11 / 02 / 2004

Amount of Each Disbursement this Period  
 74.00

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

STAMPS

**C.** Full Name (Last, First, Middle Initial)  
 Eleanor Roosevelt Democratic Club

Mailing Address PO Box 2180

City Albany State NY Zip Code 12220-

Purpose of Disbursement  
 10/20/04 EVENT

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41028.E4271  
 Date of Disbursement  
 10 / 19 / 2004

Amount of Each Disbursement this Period  
 100.00

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

10/20/04 EVENT

**SUBTOTAL** of Disbursements This Page (optional) ▶ **199.27**

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



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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial)

A. Pasquallis Restaurant

Mailing Address 10 Market Street

City Amsterdam State NY Zip Code 12010-

Purpose of Disbursement  
CAMPAIGN MTG.BKFT EVENT

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41028.E4288

Date of Disbursement

10 / 16 / 2004

Amount of Each Disbursement this Period

500.00

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

CAMPAIGN MTG.BKFT EVENT

Full Name (Last, First, Middle Initial)

B. Childrens Hospital @ Alb.Medical Center

Mailing Address 43 New Scotland Avenue

City Albany State NY Zip Code 12208-

Purpose of Disbursement  
SPONSOR-12/3/04 EVENT

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41127.E4328

Date of Disbursement

11 / 19 / 2004

Amount of Each Disbursement this Period

200.00

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

SPONSOR-12/3/04 EVENT

Full Name (Last, First, Middle Initial)

C. Charles J. Diamond

Mailing Address 22 Manor Place

City Watervliet State NY Zip Code 12189-

Purpose of Disbursement  
GASOLINE REIMBURSEMENT

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41028.E4282

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

28.50

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

GASOLINE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ▶

729.50

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

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 (check only one)

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

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NAME OF COMMITTEE (In Full)  
 McNulty for Congress

Full Name (Last, First, Middle Initial)  
**A. Alchar Printing**

Mailing Address 602 Pawling Ave.

City Troy State NY Zip Code 12180-

Purpose of Disbursement  
 CAMPAIGN ENV.&POSTAGE

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: 41028.E4274  
 Date of Disbursement  
 10 / 19 / 2004

Amount of Each Disbursement this Period  
 1150.58

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

CAMPAIGN ENV.&POSTAGE

Full Name (Last, First, Middle Initial)  
**B. Alchar Printing**

Mailing Address 602 Pawling Ave.

City Troy State NY Zip Code 12180-

Purpose of Disbursement  
 CAMPAIGN LETTERHEAD

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: 41028.E4275  
 Date of Disbursement  
 10 / 19 / 2004

Amount of Each Disbursement this Period  
 442.74

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

CAMPAIGN LETTERHEAD

Full Name (Last, First, Middle Initial)  
**C. Jewish Family Services**

Mailing Address B77 Madison Ave

City Albany State NY Zip Code 12208-

Purpose of Disbursement  
 AD/150TH ANNIV.JOURNAL

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: 41111.E4909  
 Date of Disbursement  
 11 / 02 / 2004

Amount of Each Disbursement this Period  
 175.00

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

AD/150TH ANNIV.JOURNAL

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **1768.30**

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

A. Full Name (Last, First, Middle Initial)  
Lansingburgh Boys and Girls Club

Mailing Address 501 Fourth Ave.

City Troy State NY Zip Code 12182-

Purpose of Disbursement  
TICKETS 10/31/04 EVENT

Candidate Name

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

Category/  
Type

Transaction ID: 41028.E4284  
Date of Disbursement

10 / 14 / 2004

Amount of Each Disbursement this Period

50.00

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

TICKETS 10/31/04 EVENT

B. Full Name (Last, First, Middle Initial)  
Gloversville Theatre

Mailing Address 42 North Main Street  
P.O. Box 586

City Gloversville State NY Zip Code 12076-

Purpose of Disbursement  
AD/STAGEBILL

Candidate Name

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

Category/  
Type

Transaction ID: 41028.E4284  
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

250.00

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

AD/STAGEBILL

C. Full Name (Last, First, Middle Initial)  
John McNulty III

Mailing Address 124 George Street

City Green Island State NY Zip Code 12183-

Purpose of Disbursement  
SALARY

Candidate Name

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

Category/  
Type

Transaction ID: 41028.E4280  
Date of Disbursement

10 / 14 / 2004

Amount of Each Disbursement this Period

1347.00

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

SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

1647.00

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial)  
A. John McNulty III

Mailing Address 124 George Street

City State Zip Code  
Green Island NY 12183-

Purpose of Disbursement  
SALARY

Candidate Name

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

Category/  
Type

Transaction ID: 41127.E4321  
Date of Disbursement

11 / 16 / 2004

Amount of Each Disbursement this Period

1347.00

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

SALARY

Full Name (Last, First, Middle Initial)  
B. Domenica Millington

Mailing Address 3 Kathy Lane

City State Zip Code  
Wynantskill NY 12188-

Purpose of Disbursement  
SALARY

Candidate Name

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

Category/  
Type

Transaction ID: 41028.E4281  
Date of Disbursement

10 / 14 / 2004

Amount of Each Disbursement this Period

548.58

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

SALARY

Full Name (Last, First, Middle Initial)  
C. Domenica Millington

Mailing Address 3 Kathy Lane

City State Zip Code  
Wynantskill NY 12188-

Purpose of Disbursement  
SALARY

Candidate Name

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

Category/  
Type

Transaction ID: 41127.E4319  
Date of Disbursement

11 / 16 / 2004

Amount of Each Disbursement this Period

498.05

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

SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

2394.63

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

Full Name (Last, First, Middle Initial)

A. HSBC

Mailing Address 148 George St

City Green Island State NY Zip Code 12183-

Purpose of Disbursement  
FED. TAX W/H & EXPENSE

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

Category/  
Type

Transaction ID: 41028.E4262

Date of Disbursement

10 / 14 / 2004

Amount of Each Disbursement this Period

994.05

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

FED. TAX W/H & EXPENSE

Full Name (Last, First, Middle Initial)

B. HSBC

Mailing Address 148 George St

City Green Island State NY Zip Code 12183-

Purpose of Disbursement  
FED/ TAX W/H & EXPENSE

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

Category/  
Type

Transaction ID: 41127.E4320

Date of Disbursement

11 / 16 / 2004

Amount of Each Disbursement this Period

967.04

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

FED/ TAX W/H & EXPENSE

Full Name (Last, First, Middle Initial)

C. HSBC

Mailing Address 148 George St

City Green Island State NY Zip Code 12183-

Purpose of Disbursement  
SERVICE CHARGE ON RETURNED CHECK

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

Category/  
Type

Transaction ID: 41127.E4331

Date of Disbursement

11 / 22 / 2004

Amount of Each Disbursement this Period

10.00

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

SERVICE CHARGE ON RETURNED  
CHECK

SUBTOTAL of Disbursements This Page (optional) ▶

1971.09

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

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NAME OF COMMITTEE (In Full)  
McNulty for Congress

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

Mailing Address 148 George St

City State Zip Code  
Green Island NY 12183-

Purpose of Disbursement  
CHECK PRINTING CHARGES

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41127.E4332  
Date of Disbursement

11 / 22 / 2004

Amount of Each Disbursement this Period

200.80

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

CHECK PRINTING CHARGES

Full Name (Last, First, Middle Initial)  
B. Temple Israel

Mailing Address 600 New Scotland Avenue

City State Zip Code  
Albany NY 12208-

Purpose of Disbursement  
AD/CIRCLE OF HUMANITY JOURNAL

Candidate Name

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

State: District

Category/  
Type

Transaction ID: 41111.E4310  
Date of Disbursement

11 / 02 / 2004

Amount of Each Disbursement this Period

350.00

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

AD/CIRCLE OF HUMANITY JOURNAL

SUBTOTAL of Disbursements This Page (optional) ▶

550.80

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

20116.44

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

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

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(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input 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)  
McNulty for Congress

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

Mailing Address 21 Rice Road

City Rensselaerville State NY Zip Code 12147-

Purpose of Disbursement  
10/16/04 EVENT

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41028.E4269  
Date of Disbursement

10 / 16 / 2004

Amount of Each Disbursement this Period

100.00

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

Full Name (Last, First, Middle Initial)  
B. Friends Of Frank Barbaro

Mailing Address 36 Richmond Terrace  
Suite 215

City Staten Island State NY Zip Code 10301-

Purpose of Disbursement  
CONTRIBUTION-NY DIST. 13

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41028.E4257  
Date of Disbursement

10 / 14 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
C. Samara for Congress

Mailing Address 5 East Market Street  
Suite 204

City Corning State NY Zip Code 14830-

Purpose of Disbursement  
CONTRIBUTION-HOUSE-NY #29

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41028.E4281  
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

800.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1900.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input 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)  
McNulty for Congress

Full Name (Last, First, Middle Initial)  
A. Bishop For Congress

Mailing Address P.O. Box 487

City Farmingville State NY Zip Code 11738-

Purpose of Disbursement  
CONTRIBUTION-HOUSE-NY-DIST. 1

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41028.E4258  
Date of Disbursement

10 / 14 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
B. Schenectady County Democratic Committee

Mailing Address 809 Pinewood Avenue

City Niskayuna State NY Zip Code 12308-

Purpose of Disbursement  
EXCESS CAMPAIGN FUNDS

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41028.E4282  
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

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

Full Name (Last, First, Middle Initial)  
C. Friends of Senator Neil Breslin

Mailing Address 15 Pinedale Ave.

City Delmar State NY Zip Code 12054-

Purpose of Disbursement  
TICKETS 10/15/04 EVENT

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41028.E4287  
Date of Disbursement

10 / 15 / 2004

Amount of Each Disbursement this Period

300.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1800.00

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



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

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

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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)  
 McNulty for Congress

Full Name (Last, First, Middle Initial)  
**A.** City of Troy Democratic Committee

Mailing Address 251 River Street  
 P.O. Box 846

City Troy State NY Zip Code 12181-

Purpose of Disbursement  
 EXCESS CAMPAIGN FUNDS

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: 41028.E4300  
 Date of Disbursement

10 / 26 / 2004

Amount of Each Disbursement this Period

500.00

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

Full Name (Last, First, Middle Initial)  
**B.** Herseth For Congress

Mailing Address P.O. Box 884

City Brookings State SD Zip Code 57006-

Purpose of Disbursement  
 CONTRI-HOUSE-D-SD-DIST.1)

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: 41028.E4293  
 Date of Disbursement

10 / 29 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
**C.** Friends Of Christopher T. Maier

Mailing Address P.O. Box 206

City Troy State NY Zip Code 12181-

Purpose of Disbursement  
 TICKET 10/27/04 EVENT

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: 41028.E4283  
 Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

100.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input 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)  
McNulty for Congress

Full Name (Last, First, Middle Initial)  
A. Charlie Melancon Campaign Committee

Mailing Address 511 Congress St

City Napoleonville State LA Zip Code 70390-

Purpose of Disbursement  
CONTRIBUTION-HOUSE-LA#3-RUN OFF

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41127.E4324

Date of Disbursement

11 / 17 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
B. Willie Landry Mount For Congress

Mailing Address 1830 Ryan St.  
Suite A

City Lake Charles State LA Zip Code 70601-

Purpose of Disbursement  
CONTRIBUTION-HOUSE-LA#7-RUN OFF

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41127.E4325

Date of Disbursement

11 / 17 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
C. Friends Of David Soares

Mailing Address P.O. Box 301

City Delmar State NY Zip Code 12054-

Purpose of Disbursement  
10/23/04 EVENT

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
Type

Transaction ID: 41028.E4279

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

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)  
 McNulty for Congress

Full Name (Last, First, Middle Initial)  
 A. Walsh Family Court Committee

Mailing Address P.O. Box 8562

City Albany State NY Zip Code 12208-0562

Purpose of Disbursement  
 10/26/04 EVENT

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: 41028.E4286  
 Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

200.00

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

Full Name (Last, First, Middle Initial)  
 B. Rotterdam Democratic Committee

Mailing Address c/o Lynn Marco  
 2115 Fiero Avenue

City Schenectady State NY Zip Code 12303-

Purpose of Disbursement  
 EXCESS CAMPAIGN FUNDS

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: 41028.E4291  
 Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

700.00

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

8500.00