# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of $1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL
Pete King for Congress

ADDRESS (number and street)
PO Box 1428

CITY, STATE, and ZIP CODE
Seaford, NY 11783

2. NAME OF CANDIDATE
Peter T. King

3. OFFICE SOUGHT (State and District)
NY 13

4. FEC IDENTIFICATION NUMBER

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.

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
|---|---|---|---|
| Phyllis Mack<br>370 N. Passaic St.<br>Rochelle Park, NJ 07662 | info. Requested<br>info. Requested | 10/25/00 | $1,000 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| Michael Katz<br>89 Wheatley Rd.<br>Old Westbury, NY 11568 | Sterling Equities<br>CPA | 10/25/00 | $1,000 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| David S. Mack<br>370 N Passaic St.<br>Rochelle Park, NJ 07662 | Mack Mgmt.<br>Senior Partner | 10/25/00 | $1,000 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| Realtors PAC<br>430 N. Michigan Ave.<br>Chicago, IL 60611 | | 10/26/00 | $5,000 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| New York Mercantile Exchange PAC<br>1 North End Ave, World Financial Ctr.<br>New York, NY 10282 | | 10/27/00 | $3,500<br>$500<br>$4,000 |

SIGNATURE (optional)

DATE

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

FEC FORM 6
(11/93)

FEC NUMBER

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1. NAME OF COMMITTEE IN FULL
Pete King for Congress

ADDRESS (number and street)
PO Box 1424

CITY, STATE, and ZIP CODE
Seaford, NY 11783

2. NAME OF CANDIDATE
Peter T. King

3. OFFICE SOUGHT (State and District)
NY/3

4. FEC IDENTIFICATION NUMBER
C00277921

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| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
|---|---|---|---|
| Mr. Irwin Cafetz<br>11 Moseley Road<br>Newton, MA 02459 | Info. Requested / Info. Requested | 10/25/00 | $1,000 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| Roberta Cafetz<br>11 Moseley Rd.<br>Newton, MA 02459 | Info. Requested / Info. Requested | 10/25/00 | $1,000 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| American Hospital Association<br>325 7th Street, NW<br>Washington, DC 20004 | PAC / | 10/25/00 | $1,000 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| New York State Hospital & Healthcare Association Federal PAC<br>One Empire Dr.<br>Rensselear, NY 12144 | / | 10/25/00 | $4,000 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| William Mack<br>370 W. Passaic St.<br>Rochelle Park, NJ 07662 | Mack Mgmt. / President | 10/25/00 | $1000 |

SIGNATURE (optional) | DATE

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**FEC FORM 6**
(11/93)

PRINTER PDF

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1. NAME OF COMMITTEE IN FULL
Pete King for Congress

ADDRESS (number and street)
PO Box 1428

CITY, STATE, and ZIP CODE
Seaford NY 11783

2. NAME OF CANDIDATE
PETER T. King

3. OFFICE SOUGHT (State and District)
NY 13

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4. FEC IDENTIFICATION NUMBER

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
|---|---|---|---|
| US Central Credit Union AAC<br>7300 College Blvd. Suite 600<br>Overland Park, KS 66210 | Occupation | 10/25/00 | 1,000 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount |

SIGNATURE (optional) | DATE

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(11/93)

Federal Election Commission

# ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

| | | |
|---|---|---|
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| ☐ | Received from the Senate Office of Public Records | DATE OF RECEIPT |
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| PREPARER | DATE PREPARED |
|---|---|
| n/a | n/a |

FEC FORM 70-2 (12/92)