

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 Crowley for Congress

ADDRESS (number and street) 84-56 Grand Avenue Check if different than previously reported. (ACC) Elmhurst NY 11373

2. FEC IDENTIFICATION NUMBER C00338954 3. IS THIS REPORT NEW (N) OR AMENDED (A) X CITY STATE ZIP CODE STATE DISTRICT NY 07

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X 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 08 21 2008 through 09 30 2008

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 Scott Kaufman

Signature of Treasurer Electronically Filed by Scott Kaufman Date 12 04 2008

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Crowley for Congress

Report Covering the Period:

From: 

M	M
0	8

D	D
2	1

Y	Y	Y	Y
2	0	0	8

To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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(e)).....	191794.28	1904791.80
(b) Total Contribution Refunds (from Line 20(d)).....	20.00	3128.72
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	191774.28	1901663.08
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	89421.27	1116784.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3617.08
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	89421.27	1113167.70
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>		
	1056866.66	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Crowley for Congress

Report Covering the Period: From: 

M	M
0	8

D	D
2	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

**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).....

99393.00

710221.00

(ii) Unitemized.....

0.00

16555.00

(iii) TOTAL of contributions

99393.00

726776.00

from individuals..... ▶

0.00

63.67

(b) Political Party Committees.....

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

92401.28

1177952.13

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))

191794.28

1904791.80

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

3617.08

15. OTHER RECEIPTS

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

1448.34

23565.40

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

193242.62

1931974.28

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	89421.27	1116784.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20.00	3128.72
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	20.00	3128.72
21. OTHER DISBURSEMENTS.....	18705.00	481445.76
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	108146.27	1601359.26

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	971770.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	193242.62
25. SUBTOTAL (add Line 23 and Line 24).....	1165012.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	108146.27
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1056866.66

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

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

Mailing Address 400 Atlantic Avenue

City State Zip Code  
Boston MA 02110

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Goulston Storrs Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: C4974966

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Daniel Avery

Mailing Address 7 Gypsy Trail

City State Zip Code  
Weston MA 02493

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Goulston & Storrs Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: C4975000

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)  
Mark Balk

Mailing Address 23 Dover Road

City State Zip Code  
Dover MA 02030

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Goulston Storrs Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: C4975003

Amount of Each Receipt this Period  
250.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 81</span> (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Robert Bass</p> <p>Mailing Address 201 Main Street</p> <p>City State Zip Code Fort Worth TX 76102</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Keystone Inc Investor</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">2300.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> C4970860</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">2300.00</td></tr> </table> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	8	2300.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	9		2	5		2	0	0	8																						
2300.00																															

<p><b>B.</b> Full Name (Last, First, Middle Initial) David Bonderman</p> <p>Mailing Address 301 Commerce Street</p> <p>City State Zip Code Fort Worth TX 76102</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation TPG Capital Partner</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">2000.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> C4970863</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">2000.00</td></tr> </table> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	8	2000.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	9		2	5		2	0	0	8																						
2000.00																															

<p><b>C.</b> Full Name (Last, First, Middle Initial) William Bonn</p> <p>Mailing Address 261 Commonwealth Avenue</p> <p>City State Zip Code Boston MA 02116</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Beacon Capital Partners Senior Manager</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">1000.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> C4975015</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">1000.00</td></tr> </table> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	8	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	9		3	0		2	0	0	8																						
1000.00																															

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 5px;">5300.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 5px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Nancy Broderick

Mailing Address 4 Ridge Hill Way

City State Zip Code  
Andover MA 01810

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Beacon Properties Managing Director

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Transaction ID: C4975028

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)  
Jeffrey Brown

Mailing Address 7 Chatham Way

City State Zip Code  
Lynnfield MA 01940

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Beacon Capital CFA

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Transaction ID: C4974887

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)  
Felix Busby

Mailing Address 409 E 56th Street

City State Zip Code  
Brooklyn NY 11203

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
The Right Connection Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

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

Transaction ID: C4956611

Amount of Each Receipt this Period  
2300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 4300.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Felix Busby		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 409 E 56th Street		<b>Transaction ID:</b> C4956612
	City Brooklyn	State NY	Zip Code 11203
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer The Right Connection	Occupation Engineer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles E. Callahan, III		Date of Receipt MM / DD / YYYY 09 / 02 / 2008
	Mailing Address 9 Arleigh Road		<b>Transaction ID:</b> C4954706
	City Douglaston	State NY	Zip Code 11363
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00
	Name of Employer Plaza College for Business	Occupation V.P.	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jim Clary		Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 520 Lake Cook Road Suite 520		<b>Transaction ID:</b> C4987189
	City Deerfield	State IL	Zip Code 60015
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Mullin TBG	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4100.00
<b>TOTAL</b> 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 9 / 81

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Spencer Coates

Mailing Address 700 Church Street  
PO Box 90009

City Bowling Green State KY Zip Code 42102

FEC ID number of contributing federal political committee. C

Name of Employer Houchens Industries Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 29 / 2008

**Transaction ID:** C4974452

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)  
Stephen Conley

Mailing Address 9 West Lenox Street

City Chevy Chase State MD Zip Code 20815

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation artist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C4974921

Amount of Each Receipt this Period 850.00

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

**C.**

Full Name (Last, First, Middle Initial)  
John Duffy

Mailing Address 3509 Rittenhouse Street NW

City Washington State DC Zip Code 20015

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation real estate

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C4974929

Amount of Each Receipt this Period 850.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 2700.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Martin Fantozzi

Mailing Address 70 Orchard Ave

City State Zip Code  
West Newton MA 02465

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

Name of Employer Occupation  
Goulston Storrs Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C4974943

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 92 Wheatley Rd

City State Zip Code  
Old Westbury NY 11568-1212

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

Name of Employer Occupation  
self homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2008

**Transaction ID:** C4966449

Amount of Each Receipt this Period  
2200.00

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

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

Mailing Address One Post Office Square  
Suite 3500

City State Zip Code  
Boston MA 02109

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

Name of Employer Occupation  
self real estate

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C4974917

Amount of Each Receipt this Period  
850.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 81

(check only one)

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

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)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Eletheria Gavalas

Mailing Address 21-54 24th Street

City Astoria State NY Zip Code 11105

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation homemaker

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

4600.00

Date of Receipt MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** C4956613

Amount of Each Receipt this Period 2300.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Eletheria Gavalas

Mailing Address 21-54 24th Street

City Astoria State NY Zip Code 11105

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation homemaker

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

4600.00

Date of Receipt MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** C4956614

Amount of Each Receipt this Period 2300.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Nick Gavalas

Mailing Address 21-54 24th Street

City Astoria State NY Zip Code 11105

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation real estate

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

4600.00

Date of Receipt MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** C4956616

Amount of Each Receipt this Period 2300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 6900.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Nick Gavalas

Mailing Address 21-54 24th Street

City Astoria State NY Zip Code 11105

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

Name of Employer self Occupation real estate

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 09 / 05 / 2008

Transaction ID: C4956615

Amount of Each Receipt this Period 2300.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Jimmie Gipson

Mailing Address 700 Church Street  
PO Box 90009

City Bowling Green State KY Zip Code 42102

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

Name of Employer Houchens Industries Occupation CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2008

Transaction ID: C4974451

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)  
Martin Glazer

Mailing Address 25 Stuart Road

City Newton Center State MA Zip Code 02459

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

Name of Employer Goulston Storrs Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C4974949

Amount of Each Receipt this Period 250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 81  
(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)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Susan Goldstein

Mailing Address 1930 Broadway  
Apt 27G

City State Zip Code  
New York NY 10023

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

Name of Employer self Occupation homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2008

Transaction ID: C4966666

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)  
Fred H. Gould

Mailing Address 60 Cutter Mill Road, Suite 303

City State Zip Code  
Great Neck NY 11021

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

Name of Employer BRT Realty Occupation Chair

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2008

Transaction ID: C4966456

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 60 Cutter Mill Road  
Suite 303

City State Zip Code  
Great Neck NY 11021

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

Name of Employer BRT Realty Occupation President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2008

Transaction ID: C4958476

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) ..... ► **2000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Barry Green	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 120 Crestview Road	<b>Transaction ID:</b> C4974957
	City Belmont State MA Zip Code 02478	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer self Occupation real estate Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Laura Jean Hawkins	Date of Receipt MM / DD / YYYY 09 / 02 / 2008
	Mailing Address 444 Park Ave S RM 301	<b>Transaction ID:</b> C4954707
	City New York State NY Zip Code 10016	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer The Dryfoos Group Occupation Govt. Affairs Consultant Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Horowitz	Date of Receipt MM / DD / YYYY 09 / 18 / 2008
	Mailing Address 90 Wheatley Road	<b>Transaction ID:</b> C4966556
	City Old Westbury State NY Zip Code 11568	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer P&F Industries Occupation Executive Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Douglas Husid		Date of Receipt
	Mailing Address 186 Olver Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2008
	City	State	Zip Code
	Waban	MA	02468
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4974990
Name of Employer Goulston Storrs		Occupation Lawyer	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeremy Jacobs		Date of Receipt
	Mailing Address 1300 N Davis Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2008
	City	State	Zip Code
	East Aurora	NY	14052
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4978748
Name of Employer Delaware North		Occupation CEO	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeremy Jacobs		Date of Receipt
	Mailing Address 40 Fountain Plaza		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2008
	City	State	Zip Code
	Buffalo	NY	14202
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4978749
Name of Employer Delaware North Co		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 3250.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 16 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Margaret Jacobs

Mailing Address 1300 N Davis Road

City State Zip Code  
East Aurora NY 14052

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

Name of Employer Occupation  
Manor Designs President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C4978744

Amount of Each Receipt this Period  
2000.00

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

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

Mailing Address 67 Feeks Lane

City State Zip Code  
Lattingtown NY 11560

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

Name of Employer Occupation  
MSC Industrial Supply Co. President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2008

**Transaction ID:** C4974442

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)  
Scott Jaffee

Mailing Address 15 West 39th Street  
7th Floor

City State Zip Code  
New York NY 10018

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

Name of Employer Occupation  
self real estate

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C4975046

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) ..... ► **4000.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Sherman Jewett		Date of Receipt
	Mailing Address 218 Elm Street #1		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 29 / 2008
	City	State	Zip Code
	Albany	NY	12202
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4974447
Name of Employer Pat Lynch & Associates		Occupation Partner	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Courtney Johnson		Date of Receipt
	Mailing Address 660 Pennsylvania Ave SE Suite 201		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2008
	City	State	Zip Code
	Washington	DC	20003
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4976929
Name of Employer The Alpine Group		Occupation Associate	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Timothy Joyce		Date of Receipt
	Mailing Address 1062 W Fry Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 30 / 2008
	City	State	Zip Code
	Chicago	IL	60622
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4975039
Name of Employer Goodwin Proctor		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 850.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 81
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Fredy H Kaplan	Date of Receipt MM / DD / YYYY 09 / 29 / 2008
	Mailing Address 174 2nd Street Apt 3F	<b>Transaction ID:</b> C4974446
	City State Zip Code New York NY 10009	Amount of Each Receipt this Period 500.00
	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: Pat Lynch & Associates Occupation: Partner Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Kavanau	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 410 E Porter Ave	<b>Transaction ID:</b> C4974933
	City State Zip Code Naperville IL 60540	Amount of Each Receipt this Period 850.00
	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: HFF LP Occupation: Managing Director Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 850.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Letta Kouzios	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 86-69 Sancho Street	<b>Transaction ID:</b> C4956606
	City State Zip Code Hollis NY 11423	Amount of Each Receipt this Period 2300.00
	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: The Right Connection Occupation: Owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 19 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Letta Kouzios

Mailing Address 86-69 Sancho Street

City Hollis State NY Zip Code 11423

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

Name of Employer The Right Connection Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 09 / 05 / 2008  
**Transaction ID: C4956607**  
 Amount of Each Receipt this Period 2300.00

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

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

Mailing Address 86-69 Sancho Street

City Hollis State NY Zip Code 11423

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

Name of Employer The Right Connection Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 09 / 05 / 2008  
**Transaction ID: C4956609**  
 Amount of Each Receipt this Period 2300.00

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

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

Mailing Address 86-69 Sancho Street

City Hollis State NY Zip Code 11423

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

Name of Employer The Right Connection Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 09 / 05 / 2008  
**Transaction ID: C4956610**  
 Amount of Each Receipt this Period 2300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6900.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jordan Krasnow

Mailing Address 343 Commercial Street

City Bellingham State MA Zip Code 02019

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

Name of Employer Goulston Storrs Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2008  
**Transaction ID: C4975007**  
 Amount of Each Receipt this Period 250.00

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

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

Mailing Address 305 2nd Ave, No 516

City New York State NY Zip Code 10003

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

Name of Employer Cornwell Capital Occupation Investor

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2008  
**Transaction ID: C4974449**  
 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)  
Allison Lee Hinchey

Mailing Address 67 Brucken Road

City Hurley State NY Zip Code 12443

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

Name of Employer Pat Lynch & Associates Occupation Partner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2008  
**Transaction ID: C4970866**  
 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) ..... ► 1750.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 81  
(check only one)

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

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)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Frank Litwin

Mailing Address 63 Aspen Ave

City State Zip Code  
Auburndale MA 02466

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

Name of Employer Occupation  
Goulston Storrs Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C4975008

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Patricia Loeb

Mailing Address 283 Wheatley Road

City State Zip Code  
Old Westbury NY 11568

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

Name of Employer Occupation  
Self Interior decorator

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2008

**Transaction ID:** C4966451

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)  
Doug Lowenstein

Mailing Address 950 F Street NW  
Suite 550

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
Private Equity Council President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2008

**Transaction ID:** C4966548

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) ..... ► **2250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Patricia Lynch

Mailing Address 677 Broadway, Suite 1105

City Albany State NY Zip Code 12207

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

Name of Employer Patricia Lynch Associates Occupation Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3300.00

Date of Receipt 09 / 29 / 2008

Transaction ID: C4974443

Amount of Each Receipt this Period 2300.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Dave Marchick

Mailing Address 4124 Aspen Street

City Chevy Chase State MD Zip Code 20815

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

Name of Employer The Carlyle Group Occupation Investment Professional

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C4974877

Amount of Each Receipt this Period 500.00

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

**C.**

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

Mailing Address 685 Fifth Avenue 9th Floor

City New York State NY Zip Code 10022

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

Name of Employer RFJM Partners Occupation Managing Member

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2008

Transaction ID: C4966460

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) ..... ► **3300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 81

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Gilbert Menna

Mailing Address 21 Smith Street

City State Zip Code  
Dover MA 02030

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

Name of Employer Occupation  
Goulston Storrs Attorney

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2008

Transaction ID: C4975010

Amount of Each Receipt this Period

2000.00

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

**B.**

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

Mailing Address 190 E 72nd Street

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
The Gym Source Executive

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2008

Transaction ID: C4966561

Amount of Each Receipt this Period

500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Douglas Mitchell

Mailing Address 138 Longwood Ave

City State Zip Code  
Brookline MA 02446

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

Name of Employer Occupation  
Beacon Capital Senior Manager

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2008

Transaction ID: C4975034

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) .....

3500.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial) Paul Mones		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
Mailing Address Po Box 10241		<b>Transaction ID:</b> C4956559
City Portland	State OR	Zip Code 97296
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Thomas Moran		Date of Receipt MM / DD / YYYY 09 / 08 / 2008
Mailing Address 322 Central Park West, Apt. 1B		<b>Transaction ID:</b> C4958499
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer Mutual of America	Occupation President & CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

**C.**

Full Name (Last, First, Middle Initial) Costas Nioulikos		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
Mailing Address 10 Drifway Road		<b>Transaction ID:</b> C4956605
City Danbury	State CT	Zip Code 06811
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer Direct Trading Co	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Costas Nioulikos	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 10 Drifway Road	<b>Transaction ID:</b> C4956604
	City Danbury State CT Zip Code 06811	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Direct Trading Co Occupation President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 4600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Susan Nioulikos	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 10 Driftway Road	<b>Transaction ID:</b> C4956602
	City Danbury State CT Zip Code 06811	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Direct Trading Co Occupation owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 4600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Susan Nioulikos	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 10 Driftway Road	<b>Transaction ID:</b> C4956603
	City Danbury State CT Zip Code 06811	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Direct Trading Co Occupation owner Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 4600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 27 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Kevin O'Flaherty  
Mailing Address 171 Concord Street  
City State Zip Code  
Newton Lower Falls MA 02462  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Goulston Storrs Attorney  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Amount of Each Receipt this Period  
250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Adam Popper  
Mailing Address 114 Luquer Road  
City State Zip Code  
Port Washington NY 11050  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
self consultant  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
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)  
Rosemarie Poveromo  
Mailing Address 22-32 81st Street  
City State Zip Code  
Jackson Heights NY 11370  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
self real estate  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Amount of Each Receipt this Period  
250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Andrew Quinn

Mailing Address 1501 M Street, Suite 450

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. C

Name of Employer McAllister & Quinn LLC Occupation partner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 486.00

Date of Receipt 09 / 30 / 2008

**Transaction ID:** C4990678

Amount of Each Receipt this Period 243.00

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

\* In-Kind: Fundraising Support/ Mailing List Use

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

Mailing Address 24 Gould Road

City Waban State MA Zip Code 02468

FEC ID number of contributing federal political committee. C

Name of Employer Goulston Storrs Occupation attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2008

**Transaction ID:** C4974959

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)  
Stephen Rush

Mailing Address 90 Merrivale Rd.

City Great Neck State NY Zip Code 11020

FEC ID number of contributing federal political committee. C

Name of Employer Nassau Radiology Group Occupation MD

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2008

**Transaction ID:** C4966457

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) ..... 993.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Kitt Sawitsky

Mailing Address 23 Hobart Road

City Wellesley State MA Zip Code 02482

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

Name of Employer Goulston & Storrs Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C4974993

Amount of Each Receipt this Period 250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Barbara Schmitt

Mailing Address 33 Highview Drive

City Hingham State MA Zip Code 02043

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

Name of Employer Goulston Storrs Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C4974945

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)  
Ryan Schwarz

Mailing Address 4554 Kilingle Street NW

City Washington State DC Zip Code 20016

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

Name of Employer The Carlyle Group Occupation Venture Capitalist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2008

Transaction ID: C4970857

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) ..... ► 1500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Wendy Shenfeld

Mailing Address 2A Melby Lane

City Roslyn State NY Zip Code 11576

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

Name of Employer self Occupation homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 500.00

Transaction ID: C4968947

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

**B.**

Full Name (Last, First, Middle Initial)  
Steven Shoyer

Mailing Address 32 Woodridge Road

City Wayland State MA Zip Code 01778

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

Name of Employer Elite Racing Occupation Sales Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 250.00

Transaction ID: C4974972

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

**C.**

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

Mailing Address 200 State Street  
5th Floor

City Boston State MA Zip Code 02109

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

Name of Employer Beacon Capital Partners Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 2000.00

Transaction ID: C4975042

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2750.00**

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

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

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

FOR LINE NUMBER: PAGE 31 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sophia Smalios  
Mailing Address 25-69 12th Street  
City Astoria State NY Zip Code 11102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Industrial Pump & Balance Occupation Administrator  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 09 / 05 / 2008  
Transaction ID: C4996319  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sophia Smalios  
Mailing Address 25-69 12th Street  
City Astoria State NY Zip Code 11102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Industrial Pump & Balance Occupation Administrator  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 09 / 05 / 2008  
Transaction ID: C4956618  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Sophia Smalios  
Mailing Address 25-69 12th Street  
City Astoria State NY Zip Code 11102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Industrial Pump & Balance Occupation Administrator  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 09 / 30 / 2008  
Transaction ID: C4996326  
Amount of Each Receipt this Period -2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
This was a rejected credit card transaction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2300.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 32 / 81  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Scott Smith  
 Mailing Address 150-44 11th Ave  
 City Whitestone State NY Zip Code 11357  
 Date of Receipt 09 / 30 / 2008  
**Transaction ID: C4975053**  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Lawrence Environmental Group, LLC Occupation Partner  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Harold Stahler  
 Mailing Address 42 Greylock Road  
 City West Newton State MA Zip Code 02465  
 Date of Receipt 09 / 30 / 2008  
**Transaction ID: C4974994**  
 Amount of Each Receipt this Period 250.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer self Occupation real estate  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Daniel Sullivan  
 Mailing Address 235 Goddard Ave  
 City Brookline State MA Zip Code 02445  
 Date of Receipt 09 / 30 / 2008  
**Transaction ID: C4975036**  
 Amount of Each Receipt this Period 250.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Goulston & Storrs Occupation Attorney  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 33 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ann Sweeney  
Mailing Address 12-27 152nd Street  
City Whitestone State NY Zip Code 11357-1835  
FEC ID number of contributing federal political committee. **C**  
Name of Employer none Occupation Homemaker  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 04 / 2008  
Transaction ID: C4955438  
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)  
Sylvia Tokasz  
Mailing Address 42 Countryside Lane  
City Depew State NY Zip Code 14043  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation homemaker  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 500.00  
Date of Receipt 09 / 29 / 2008  
Transaction ID: C4974448  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
John Twohig  
Mailing Address 90 Samuel Ave  
City Brockton State MA Zip Code 02301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Goulston & Starr Occupation Attorney  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00  
Date of Receipt 09 / 30 / 2008  
Transaction ID: C4974937  
Amount of Each Receipt this Period 250.00  
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniella Venetis	Date of Receipt MM / DD / YYYY 09 / 18 / 2008
	Mailing Address 154-32 17th Road	<b>Transaction ID:</b> C4966394
	City State Zip Code Whitestone NY 11357	Amount of Each Receipt this Period 2300.00
	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 Vema Contracting Manager	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Wallack	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 234 Park Street	<b>Transaction ID:</b> C4975012
	City State Zip Code Newton MA 02458	Amount of Each Receipt this Period 500.00
	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 Goulston Storrs Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Claudius Watts	Date of Receipt MM / DD / YYYY 09 / 24 / 2008
	Mailing Address 1000 Mt Vernon Ave	<b>Transaction ID:</b> C4970107
	City State Zip Code Charlotte NC 28203	Amount of Each Receipt this Period 2300.00
	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 The Carlyle Group Private Investor	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5100.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 81

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

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

Mailing Address 16 Traill Street

City	State	Zip Code
Cambridge	MA	02138

FEC ID number of contributing federal political committee. C

Name of Employer self	Occupation real estate broker
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">850.00</span>

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Transaction ID: C4974912

Amount of Each Receipt this Period

850.00
--------

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">850.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">99393.00</span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
ACE INA PAC

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00348938

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2008  
**Transaction ID:** C4974296  
 Amount of Each Receipt this Period 1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
AFT-COPE

Mailing Address American Federation of Teachers  
555 New Jersey Avenue, N.W.

City Washington State DC Zip Code 20001-2079

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** C4975056  
 Amount of Each Receipt this Period 2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
AMERICA'S HEALTH INSURANCE PLANS PAC (AHIP PAC)

Mailing Address 601 Penn. Avenue NW  
#500 South Bldg.

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106740

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 09 / 29 / 2008  
**Transaction ID:** C4974295  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
American Academy of Dermatology Association

Mailing Address 1350 I St NW  
Ste 870

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 08 / 2008  
**Transaction ID:** C4958485  
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)  
Amgen

Mailing Address 555 13th St NW  
Suite 600 West

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 24 / 2008  
**Transaction ID:** C4970105  
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)  
AT&T PAC

Mailing Address AT&T Corporation  
32 Avenue of the Americas

City New York State NY Zip Code 10013

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** C4986999  
Amount of Each Receipt this Period: 3000.00

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

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Bank of America Corporation PAC

Mailing Address 600 Peachtree Street NE  
3rd Floor

City Atlanta State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 09 / 09 / 2008  
**Transaction ID:** C4959049  
 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)  
BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COM

Mailing Address ONE BOSTON SCIENTIFIC PLACE

City NATICK State MA Zip Code 01760

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** C4976921  
 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)  
BUILD Political Action Committee

Mailing Address of the National Assn. of Home Buil  
Bobby Rayburn, 2000 Chairman

City Washington State DC Zip Code 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 09 / 08 / 2008  
**Transaction ID:** C4958556  
 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) ..... ► 3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Burlington Northern Santa Fe

Mailing Address P.O. Box 961039  
Suite 220

City State Zip Code  
Fort Worth TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2008

Transaction ID: C4970103

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)  
Burlington Northern Santa Fe

Mailing Address P.O. Box 961039  
Suite 220

City State Zip Code  
Fort Worth TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2008

Transaction ID: C4974297

Amount of Each Receipt this Period  
1500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Coca-Cola Enterprises, Inc.

Mailing Address P.O. Box 723040

City State Zip Code  
Atlanta GA 31139-0040

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2008

Transaction ID: C4967702

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) ..... ► **3500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
DRIVE Political Fund IBT

Mailing Address Affiliated w/ Intn'l Brotherhood o  
25 Louisiana Avenue, N.W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 09 / 08 / 2008  
**Transaction ID:** C4967703  
 Amount of Each Receipt this Period: 5000.00

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

**B.** Full Name (Last, First, Middle Initial)  
EASTMAN KODAK COMPANY EMPLOYEE POLITICAL ACTION CO

Mailing Address 343 State Street

City Rochester State NY Zip Code 14650

FEC ID number of contributing federal political committee. **C** C00297085

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 08 / 21 / 2008  
**Transaction ID:** C4951370  
 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)  
EDWARDS LIFESCIENCES POLITICAL ACTION COMMITTEE (E

Mailing Address ONE EDWARDS WAY

City IRVINE State CA Zip Code 92614

FEC ID number of contributing federal political committee. **C** C00411900

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 29 / 2008  
**Transaction ID:** C4974445  
 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) ..... ► 7000.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Mailing Address LILLY CORPORATE CENTER

City State Zip Code  
INDIANAPOLIS IN 46285

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 8

**Transaction ID:** C4987181

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Financial Services Roundtable PAC

Mailing Address 805 Fifteenth Street N.W.

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 8

**Transaction ID:** C4987004

Amount of Each Receipt this Period  
3000.00

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

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

Mailing Address Intl. Association of Firefighters  
1750 New York Avenue, N.W.

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C70003108

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 0 4 / 2 0 0 8

**Transaction ID:** C4955988

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) ..... ► **6000.00**

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

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

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

FOR LINE NUMBER: PAGE 42 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
FIRE PAC

Mailing Address Intl. Association of Firefighters  
1750 New York Avenue, N.W.

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C70003108

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** C4974996  
 Amount of Each Receipt this Period 5000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Friends of Paul Tokasz

Mailing Address 71 W Melcourt Drive

City Cheektowaga State NY Zip Code 14225

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** C4990679  
 Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Avenue NW  
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 09 / 18 / 2008  
**Transaction ID:** C4966370  
 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) ..... ► **8000.00**

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

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

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

FOR LINE NUMBER: PAGE 43 / 81

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

Full Name (Last, First, Middle Initial)  
ICCFA

Mailing Address 107 Carpenter Drive  
Suite 100

City State Zip Code  
Sterling VA 20164

FEC ID number of contributing  
federal political committee. **C** C00385195

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2008

Transaction ID: C4966390

Amount of Each Receipt this Period

2000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
INT'L. ASSOCIATION OF BRIDGE STRUCTURAL ORNAMENTAL

Mailing Address 1750 New York Ave. NW  
Suite 400

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 23 / 2008

Transaction ID: C4968942

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)  
Int'l Union of Operating Engineers

Mailing Address 265 West 14th Street

City State Zip Code  
New York NY 10011

FEC ID number of contributing  
federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 29 / 2008

Transaction ID: C4974298

Amount of Each Receipt this Period

1500.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
International Association of Heat & Frost

Mailing Address 25-19 43rd Avenue

City State Zip Code  
Long Island City NY 11101

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** C4956563

Amount of Each Receipt this Period  
750.00

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

**B.** Full Name (Last, First, Middle Initial)  
Jackson National Life Insurance

Mailing Address 1 Corporate Way

City State Zip Code  
LANSING MI 48951

FEC ID number of contributing federal political committee. **C** C00254953

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2008

**Transaction ID:** C4974444

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)  
LINCOLN NATIONAL CORP PAC

Mailing Address 1300 South Clinton Street

City State Zip Code  
Fort Wayne IN 46801

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 02 / 2008

**Transaction ID:** C4954705

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) ..... ► **2750.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 81  
(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)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
LOCKHEED MARTIN EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Drive  
Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt: 09 / 02 / 2008  
**Transaction ID:** C4954779

Amount of Each Receipt this Period: 4000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mason Tenders District Council PAC

Mailing Address 266 West 37th Street  
Suite 1150

City New York State NY Zip Code 10018

FEC ID number of contributing federal political committee. **C** C00337733

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt: 09 / 18 / 2008  
**Transaction ID:** C4966391

Amount of Each Receipt this Period: 5000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Master Card International PAC

Mailing Address 2000 Purchase St.

City Purchase State NY Zip Code 10577

FEC ID number of contributing federal political committee. **C** C00410274

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 09 / 09 / 2008  
**Transaction ID:** C4959196

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) ..... ► **11000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Master Card International PAC

Mailing Address 2000 Purchase St.

City Purchase State NY Zip Code 10577

FEC ID number of contributing federal political committee. **C** C00410274

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** C4987182

Amount of Each Receipt this Period: 2500.00

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

**B.** Full Name (Last, First, Middle Initial)  
MUTUAL OF OMAHA CO (FORMERLY GENERAL AGENTS & MANA)

Mailing Address MUTUAL OF OMAHA PLAZA

City OMAHA State NE Zip Code 68175

FEC ID number of contributing federal political committee. **C** C00103572

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 09 / 04 / 2008  
**Transaction ID:** C4955992

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)  
National Beer Wholesalers Association

Mailing Address Political Action Committee  
1100 King Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** C4987210

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) ..... ► **6000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
NATIONWIDE POLITICAL PARTICIPATION COMMITTEE

Mailing Address ONE NATIONWIDE PLAZA

City State Zip Code  
COLUMBUS OH 43216

FEC ID number of contributing federal political committee. **C** C00076174

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 24 / 2008

**Transaction ID:** C4970101

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
NEW YORK MERCANTILE EXCHANGE POLITICAL ACTION COMM

Mailing Address One North End Avenue  
14th Floor

City State Zip Code  
New York NY 10282

FEC ID number of contributing federal political committee. **C** C00230185

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 9000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 28 / 2008

**Transaction ID:** C4953525

Amount of Each Receipt this Period  
5000.00

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

**C.** Full Name (Last, First, Middle Initial)  
PFIZER INC. PAC

Mailing Address 235 East 42nd Street

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 9282.56

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 21 / 2008

**Transaction ID:** C4951369

Amount of Each Receipt this Period  
1141.28

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8141.28**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION

Mailing Address 711 HIGH STREET  
GOVERNMENT RELATIONS

City State Zip Code  
DES MOINES IA 50392

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2008

**Transaction ID:** C4966377

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)  
Procter & Gamble

Mailing Address One Procter & Gamble Plaza

City State Zip Code  
Cincinnati OH 45202

FEC ID number of contributing federal political committee. **C** C00257329

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2008

**Transaction ID:** C4966380

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)  
SEARS POLITICAL ACTION COMMITTEE

Mailing Address 3333 BEVERLY ROAD BSC: B5-114B

City State Zip Code  
HOFFMAN ESTATES IL 60179

FEC ID number of contributing federal political committee. **C** C00038612

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2008

**Transaction ID:** C4987196

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) ..... ▶ **3000.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sierra Club Political Committee

Mailing Address 85 Second Street, 2nd Floor

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C** C70001318

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 20.00

Date of Receipt: 09 / 21 / 2008  
**Transaction ID:** C4968042  
 Amount of Each Receipt this Period: 10.00

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

\* In-Kind: Website Endorsement

**B.** Full Name (Last, First, Middle Initial)  
SMITHKLINE BEECHAM CORPORATION POLITICAL ACTION CO

Mailing Address Five Moore Drive  
P.O. Box 13358

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 09 / 29 / 2008  
**Transaction ID:** C4974299  
 Amount of Each Receipt this Period: 2500.00

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

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

Mailing Address 75 Rockefeller Plaza

City New York State NY Zip Code 10019

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 09 / 29 / 2008  
**Transaction ID:** C4974455  
 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) ..... ► 4510.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.** Full Name (Last, First, Middle Initial)  
United States 7-Eleven Employees

Mailing Address 2711 N HASKELL AVE  
PO BOX 711

City DALLAS State TX Zip Code 75221

FEC ID number of contributing federal political committee. **C** C00086298

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID: C4978737**  
 Amount of Each Receipt this Period: 500.00

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

**B.** Full Name (Last, First, Middle Initial)  
UNITED STATES TELECOM ASSOCIATION POLITICAL ACTION

Mailing Address 607 14th Street Northwest  
Suite 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000984

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID: C4976925**  
 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)  
UPSPAC

Mailing Address United Parcel Service of America,  
55 Glenlake Parkway N.E.

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 09 / 20 / 2008  
**Transaction ID: C4967948**  
 Amount of Each Receipt this Period: 5000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 81  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

**A.**

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

Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300

City HOUSTON State TX Zip Code 77060

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 08 / 21 / 2008  
**Transaction ID:** C4951371

Amount of Each Receipt this Period: 2500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
WACHOVIA CORPORATION EMPLOYEES GOOD GOVERNMENT FED

Mailing Address 301 South College Street  
Attention: Brenda Bradley

City Charlotte State NC Zip Code 28288

FEC ID number of contributing federal political committee. **C** C00300178

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 09 / 02 / 2008  
**Transaction ID:** C4954778

Amount of Each Receipt this Period: 3000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
WACHOVIA CORPORATION EMPLOYEES GOOD GOVERNMENT FED

Mailing Address 301 South College Street  
Attention: Brenda Bradley

City Charlotte State NC Zip Code 28288

FEC ID number of contributing federal political committee. **C** C00300178

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 09 / 29 / 2008  
**Transaction ID:** C4974453

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) ..... ► **8000.00**

**TOTAL** This Period (last page this line number only) ..... ► **92401.28**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 52 / 81	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 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)  
Crowley for Congress

A.

Full Name (Last, First, Middle Initial) North Fork Bank		Date of Receipt
Mailing Address 89-01 Queens Blvd.		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
City	State	Zip Code
Elmhurst	NY	11373
FEC ID number of contributing federal political committee.		Transaction ID: C4995008
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1448.34"/>
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="23625.40"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1448.34"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1448.34"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
Crowley for Congress

A.

Full Name (Last, First, Middle Initial)  
Alliance of Queens Artists

Mailing Address 99-10 Metropolitan Avenue

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement  
Advertising

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227328

Date of Disbursement

09 / 21 / 2008

Amount of Each Disbursement this Period

175.00

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

B.

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

Mailing Address 28-27 48th Street

City Astoria State NY Zip Code 11103

Purpose of Disbursement  
outside service/mailling

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227297

Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

75.00

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

C.

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

Mailing Address 28-27 48th Street

City Astoria State NY Zip Code 11103

Purpose of Disbursement  
outside sevice/mailling

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227368

Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

75.00

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

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

325.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) ASAP Printing</p> <p>Mailing Address 2805 Mount Vernon Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement Printing &amp; Reproduction</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227275</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1222.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ASAP Printing</p> <p>Mailing Address 2805 Mount Vernon Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement Postage &amp; Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227276</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 3111.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Board of Elections City of New York</p> <p>Mailing Address</p> <p>City Board of Elections State NY Zip Code</p> <p>Purpose of Disbursement Printing &amp; Reproduction</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227280</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 202.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

4535.37

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.	Full Name (Last, First, Middle Initial) Carrie Mobley Mailing Address 140 Asch Loop, Apt. 12D City Bronx State NY Zip Code 10475 Purpose of Disbursement Event Staff Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227340 Date of Disbursement 09 / 21 / 2008 Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. Mailing Address 109 Clermont Avenue City Alexandria State VA Zip Code 22304 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227277 Date of Disbursement 08 / 21 / 2008 Amount of Each Disbursement this Period 675.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Chelsea Reform Democratic Club Mailing Address PO Box 1120 Old Chelsea Station City New York State NY Zip Code 10113 Purpose of Disbursement Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227291 Date of Disbursement 08 / 21 / 2008 Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1375.59
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Christian Anzalone</p> <p>Mailing Address 28-27 48th Street</p> <p>City Astoria State NY Zip Code 11103</p> <p>Purpose of Disbursement outside service/mailling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227298</p> <p>Date of Disbursement 08 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Christian Anzalone</p> <p>Mailing Address 28-27 48th Street</p> <p>City Astoria State NY Zip Code 11103</p> <p>Purpose of Disbursement outside service/maillings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227369</p> <p>Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Church of the Savior</p> <p>Mailing Address Rev. Dr. Robert A. Smith Jr. Pasto</p> <p>City Bronx State NY Zip Code 10475</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227292</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 60.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

210.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.

Full Name (Last, First, Middle Initial)  
College Point Board of Trade, Inc

Mailing Address 1415 Blvd.

City State Zip Code  
College Point NY 11356

Purpose of Disbursement  
Advertising

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227287

Date of Disbursement

08 / 21 / 2008

Amount of Each Disbursement this Period

275.00

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

B.

Full Name (Last, First, Middle Initial)  
Complete Campaign

Mailing Address 616 Gateway Center Way  
Suite K

City State Zip Code  
San Diego CA 92192

Purpose of Disbursement  
On Line contribution fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227090

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

150.00

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

C.

Full Name (Last, First, Middle Initial)  
Sara Conrad

Mailing Address 1735 New Hampshire Ave NW #105

City State Zip Code  
Washington DC 20009

Purpose of Disbursement  
Reimbursement of travel each not ov

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227313

Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

1234.02

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

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

1659.02

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Davis &amp; Harman LLP</p> <p>Mailing Address 1455 Pennsylvania Avenue, NW #1200</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Room Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227278</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) DOMINICK TOTINO PHOTOGRAPHY</p> <p>Mailing Address 151-30 18TH AVE</p> <p>City Whitestone State NY Zip Code 11357-3102</p> <p>Purpose of Disbursement Photography</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227300</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 32.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) IRS</p> <p>Mailing Address UNITED STATES TREASURY PO BOX 416</p> <p>City Newark State NJ Zip Code 07101-0416</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227032</p> <p>Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

**3282.51**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.	Full Name (Last, First, Middle Initial) Jewish Voice  Mailing Address 2150 East 4th Street  City Brooklyn State NY Zip Code 11223  Purpose of Disbursement Advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227318 Date of Disbursement 09 / 21 / 2008  Amount of Each Disbursement this Period 300.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Annette Juriaco  Mailing Address 25-18 44 Street  City Astoria State NY Zip Code 11103  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227342 Date of Disbursement 09 / 21 / 2008  Amount of Each Disbursement this Period 1200.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Annette Juriaco  Mailing Address 25-18 44 Street  City Astoria State NY Zip Code 11103  Purpose of Disbursement Payroll Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227296 Date of Disbursement 08 / 21 / 2008  Amount of Each Disbursement this Period 1200.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Scott Kaufman</p> <p>Mailing Address 84-56 Grand Avenue</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227314</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Killean Enterprises LLC</p> <p>Mailing Address 84-56 Grand Avenue Elmhurst, New Y</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227311</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Killean Enterprises LLC</p> <p>Mailing Address 84-56 Grand Avenue Elmhurst, New Y</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227332</p> <p>Date of Disbursement 09 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.	Full Name (Last, First, Middle Initial) Maspeth Town Hall <hr/> Mailing Address 53-37 72nd Street New York <hr/> City Maspeth State NY Zip Code 11378 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227315 Date of Disbursement 09 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 125.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) NGP Software <hr/> Mailing Address 5039 Connecticut Avenue, Suite 1A <hr/> City Washington State DC Zip Code 20008 <hr/> Purpose of Disbursement Computer Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227335 Date of Disbursement 09 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 5050.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Queens County Council JWV <hr/> Mailing Address P.O. Box 26 <hr/> City Glen Oaks State NY Zip Code 11004 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227285 Date of Disbursement 08 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5325.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 81

<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)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>QUEENS LEDGER NEWSPAPER</b>	<b>Transaction ID:</b> D227301																			
	Mailing Address 5551 69TH ST PO BOX 780376	Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	7		2	0	0	8												
	City Maspeth	State NY	Zip Code 11378-0376	Amount of Each Disbursement this Period <table border="1"><tr><td>60.00</td></tr></table>	60.00																
60.00																					
	Purpose of Disbursement Advertising	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Candidate Name																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>B.</b>	Full Name (Last, First, Middle Initial) <b>QUEENS TIMES</b>	<b>Transaction ID:</b> D227303																			
	Mailing Address 48-08 111TH ST	Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	7		2	0	0	8												
	City Corona	State NY	Zip Code 11368	Amount of Each Disbursement this Period <table border="1"><tr><td>80.00</td></tr></table>	80.00																
80.00																					
	Purpose of Disbursement Advertising	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Candidate Name																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>C.</b>	Full Name (Last, First, Middle Initial) <b>Andrew Quinn</b>	<b>Transaction ID:</b> D226478																			
	Mailing Address 1501 M Street, Suite 450	Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	8												
	City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period <table border="1"><tr><td>243.00</td></tr></table>	243.00																
243.00																					
	Purpose of Disbursement Fundraising Support/ Mailing List Use	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Candidate Name																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

\* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>383.00</td></tr></table>	383.00
383.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Retriever Payment Systems</p> <p>Mailing Address 20405 State Hwy 249 Ste 700</p> <p>City Houston State TX Zip Code 77070</p> <p>Purpose of Disbursement credit card charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227031</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 317.46</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Stop &amp; Stor</p> <p>Mailing Address 7404 Grand Avenue</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement Storage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227336</p> <p>Date of Disbursement 09 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 387.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Conrad Group</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Management</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227310</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 7000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

7704.46

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 81

<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)  
Crowley for Congress

A.

Full Name (Last, First, Middle Initial)  
The Conrad Group

Mailing Address 426 C Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Management

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227331

Date of Disbursement

09 / 21 / 2008

Amount of Each Disbursement this Period

7000.00

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

B.

Full Name (Last, First, Middle Initial)  
THE SERVICE

Mailing Address 4216 34TH AVE

City Long Island City State NY Zip Code 11101

Purpose of Disbursement  
Advertising

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227299

Date of Disbursement

09 / 07 / 2008

Amount of Each Disbursement this Period

250.00

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

C.

Full Name (Last, First, Middle Initial)  
Throggs Neck Merchant Association, Inc.

Mailing Address 3707 East Tremont Avenue

City Bronx State NY Zip Code 10465

Purpose of Disbursement  
Advertising

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227294

Date of Disbursement

08 / 21 / 2008

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) ..... ▶

7350.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Time Warner Cable</p> <p>Mailing Address P.O. Box 371365</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Cable</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227305</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 92.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Times Ledger</p> <p>Mailing Address Queens Publishing Corp. 41-02 Bell Boulevard, 2nd Floor</p> <p>City Bayside State NY Zip Code 11361</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227326</p> <p>Date of Disbursement 09 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 150.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO BOX 7247</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Courier</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227337</p> <p>Date of Disbursement 09 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 25.35</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

268.24

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) UPS Mailing Address PO BOX 7247 City Philadelphia State PA Zip Code 19170-0001 Purpose of Disbursement Courier Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227306 Date of Disbursement 09 / 07 / 2008 Amount of Each Disbursement this Period 63.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address Attn: Jackie McCrocklin PO Box 15062 City Albany State NY Zip Code 12212 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227304 Date of Disbursement 09 / 07 / 2008 Amount of Each Disbursement this Period 347.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. BOX 15124 City Albany State NY Zip Code 12212 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227274 Date of Disbursement 08 / 21 / 2008 Amount of Each Disbursement this Period 166.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

578.05

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address P.O. BOX 15124</p> <p>City Albany State NY Zip Code 12212</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227333</p> <p>Date of Disbursement 09 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 172.36</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Vona &amp; Vona LLP</p> <p>Mailing Address 56-19 Metropolitan Avenue</p> <p>City Ridgewood State NY Zip Code 11385</p> <p>Purpose of Disbursement Accounting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227279</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 2575.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 2855</p> <p>City New York State NY Zip Code 10116-2855</p> <p>Purpose of Disbursement Credit Card See Below Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227307</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 45945.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

48692.53

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.	Full Name (Last, First, Middle Initial) Bistro Bis  Mailing Address 15 E Street, N.W.  City Washington State DC Zip Code 20001  Purpose of Disbursement Food & Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227351 Date of Disbursement 09 / 21 / 2008  Amount of Each Disbursement this Period 1940.38  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Conference Audio Visual  Mailing Address 8780 E. Yale Avenue  City Denver State CO Zip Code 80237  Purpose of Disbursement Equipment Rental Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227365 Date of Disbursement 09 / 21 / 2008  Amount of Each Disbursement this Period 250.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) Courtyard Hotel  Mailing Address 948 W. Dillon Road  City Louisville State CO Zip Code 80027  Purpose of Disbursement Accomodations Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227362 Date of Disbursement 09 / 21 / 2008  Amount of Each Disbursement this Period 1605.85  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Daizie's Restaurant <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement Food & Beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227348 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 100.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b>
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Daizie's Restaurant <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement Food & Beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227346 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 553.55
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b>
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Delta Airlines <hr/> Mailing Address New York <hr/> City State Zip Code Flushing NY 11354 <hr/> Purpose of Disbursement candidate travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227343 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 238.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b>
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.	Full Name (Last, First, Middle Initial) Dream Hotel <hr/> Mailing Address 210 West 55th Street <hr/> City New York State NY Zip Code 10019 <hr/> Purpose of Disbursement lodging for fundraiser Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227359 Date of Disbursement 09 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 313.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Enterprise <hr/> Mailing Address 351 broadway <hr/> City denver State CO Zip Code <hr/> Purpose of Disbursement Car Rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227356 Date of Disbursement 09 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 210.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) Magnolia Hotel <hr/> Mailing Address 818 17th Street <hr/> City Denver State CO Zip Code 80202 <hr/> Purpose of Disbursement Accomodations Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227363 Date of Disbursement 09 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 343.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.

Full Name (Last, First, Middle Initial)  
Magnolia Hotel

Mailing Address 818 17th Street

City State Zip Code  
Denver CO 80202

Purpose of Disbursement  
Accommodations  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D227364  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Premiere Transportation

Mailing Address 456 N. Pearl Street

City State Zip Code  
Albany NY 12204

Purpose of Disbursement  
Transportation  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D227353  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Premiere Transportation

Mailing Address 456 N. Pearl Street

City State Zip Code  
Albany NY 12204

Purpose of Disbursement  
Transportation  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D227354  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

[MEMO ITEM]

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Saratoga Hilton  Mailing Address 534 Broadway  City Saratoga Springs State NY Zip Code 12866 Purpose of Disbursement Accomodations Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227357 Date of Disbursement 09 / 21 / 2008  Amount of Each Disbursement this Period 447.05  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Saratoga Hilton  Mailing Address 534 Broadway  City Saratoga Springs State NY Zip Code 12866 Purpose of Disbursement Accomodations Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227344 Date of Disbursement 09 / 21 / 2008  Amount of Each Disbursement this Period 884.03  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Saratoga Hilton  Mailing Address 534 Broadway  City Saratoga Springs State NY Zip Code 12866 Purpose of Disbursement Accomodations Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227345 Date of Disbursement 09 / 21 / 2008  Amount of Each Disbursement this Period 158.83  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**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)

<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)  
Crowley for Congress

A.

Full Name (Last, First, Middle Initial)  
Saratoga Racetrack

Mailing Address

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Food & Beverage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227355  
Date of Disbursement

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

Amount of Each Disbursement this Period

396.95
--------

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
The Parting Glass

Mailing Address 40-42 Lake Avenue

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Food & Beverage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227349  
Date of Disbursement

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

Amount of Each Disbursement this Period

402.07
--------

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
The Wine Bar

Mailing Address 417 Broadway

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement  
Food & Beverage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D227352  
Date of Disbursement

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

Amount of Each Disbursement this Period

4386.25
---------

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

[MEMO ITEM]

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.

Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60660

Purpose of Disbursement

Airfare

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D227361

Date of Disbursement

09 / 21 / 2008

Amount of Each Disbursement this Period

311.49

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

[MEMO ITEM]

B.

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

Mailing Address 4000 East Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement

candidate travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D227358

Date of Disbursement

09 / 21 / 2008

Amount of Each Disbursement this Period

679.00

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

[MEMO ITEM]

C.

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

Mailing Address 4000 East Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement

candidate travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D227347

Date of Disbursement

09 / 21 / 2008

Amount of Each Disbursement this Period

180.00

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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<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)  
Crowley for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) USPS Mailing Address 50-01 Junction Blvd City Elmhurst State NY Zip Code 11373 Purpose of Disbursement Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227350 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 2100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Zengo Restaurant Mailing Address 1610 Little Raven Street City Denver State CO Zip Code 80202 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227366 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 25798.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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

0.00

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

88388.77

**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 76 / 81

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

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NAME OF COMMITTEE (In Full)  
Crowley for Congress

A.

Full Name (Last, First, Middle Initial)  
Citibank

Transaction ID: D227030

Date of Disbursement

Mailing Address P.O. Box 8118

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

City State Zip Code  
South Hackensack NJ 07606-8118

Amount of Each Disbursement this Period

20.00
-------

Purpose of Disbursement  
Bank service charge

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

20.00

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

20.00

# 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)

<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)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bronx County Columbus Day Parade</p> <p>Mailing Address 1824 Bronxdale Avenue Attn: Tony</p> <p>City Bronx State NY Zip Code 10462</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227282 <b>Date of Disbursement</b> 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catholic Widows &amp; Widowers Club of the Br</p> <p>Mailing Address c/o Our Lady of the Assumption 163</p> <p>City Bronx State NY Zip Code 10461</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227283 <b>Date of Disbursement</b> 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committ</p> <p>Mailing Address 430 South Capitol Street</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement contrib of excess camp funds</p> <p>Candidate Name Democratic Congressional Campaign Committ</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227312 <b>Date of Disbursement</b> 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

11200.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Frankie's Carnival Time</p> <p>Mailing Address 3435 East Tremont Avenue</p> <p>City Bronx State NY Zip Code 10465</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227281 <b>Date of Disbursement</b> 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 585.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Maspeth Town Hall</p> <p>Mailing Address 53-37 72nd Street New York</p> <p>City Maspeth State NY Zip Code 11378</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227316 <b>Date of Disbursement</b> 09 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Morris Park Community Association</p> <p>Mailing Address 1824 Bronxdale Avenue</p> <p>City Bronx State NY Zip Code 10462</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name Morris Park Community Association</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227284 <b>Date of Disbursement</b> 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1095.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
Crowley for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Northside Democratic Association, Inc.</p> <p>Mailing Address 48-08 111th Street</p> <p>City Corona State NY Zip Code 11368</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227289</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1200.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) St. Rita's Center</p> <p>Mailing Address 2342 Andrews Avenue</p> <p>City Bronx State NY Zip Code 10468</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227293</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Survival Instinct- The Network, Inc.</p> <p>Mailing Address PO Box 566</p> <p>City Bronx State NY Zip Code 10472</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227302</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

1950.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Throgg's Neck Halloween Parade Committee</p> <p>Mailing Address c/o Assemblyman Michael Benedetto</p> <p>City State Zip Code Bronx NY 10461</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227330</p> <p>Date of Disbursement 09 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Throggs Neck Merchant Association, Inc.</p> <p>Mailing Address 3707 East Tremont Avenue</p> <p>City State Zip Code Bronx NY 10465</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227295</p> <p>Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 150.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Urban Neighborhood Educational Technology</p> <p>Mailing Address 3448 Wilson Avenue, Suite GC</p> <p>City State Zip Code Bronx NY 10469</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D227309</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

2650.00

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



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

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

FOR LINE NUMBER: (check only one)

<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)  
Crowley for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Young Israel of Parkchester Mailing Address PO Box 520 New York City Bronx State NY Zip Code 10462 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227319 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Zodiac Track Club Mailing Address 140 Donizetti Place Apt 25E New Y City Bronx State NY Zip Code 10475 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D227341 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>18145.00</b>