

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 38

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

FEB 3 1 11 PM '98

1. NAME OF COMMITTEE (In full) <b>Giannaros For Congress</b>		2. FEC IDENTIFICATION NUMBER C00329433
ADDRESS (number and street) 55 Basswood Road	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Farmington CT 08032	STATE / DISTRICT CT / 6	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

## 4. TYPE OF REPORT

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Twelfth day report preceding \_\_\_\_\_ (election type) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Termination report

This report contains activity for  Primary election  General election  Runoff election  Special election

## SUMMARY

5. Covering period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>8/21/1997</u> through <u>12/31/1997</u>		
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(e))	133916.88	133916.88
(b) Total Contribution Refunds (from line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	133916.88	133916.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	20780.66	20780.66
(b) Total Offsets to Operating Expenditures (from line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	20780.66	20780.66
8. Cash on Hand at Close of Reporting Period (from line 27)	120260.43	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	15000.00	

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  
**ANDREW ANDREWS**

Signature of Treasurer



Date

1/29/98

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

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FEC FORM 3  
(revised 4/87)

**DETAILED SUMMARY PAGE**  
**of Receipts and Disbursements**  
 (Page 2, FEC Form 3)

Name of Committee (In full) Giannaros For Congress	Report Covering the Period From: 8/21/1997 To: 12/31/1997	
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-To-Date</b>
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	74704.88	
(ii) Unitemized	55745.00	
(iii) Total of contributions from individuals	131449.88	131449.88
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	300.00	300.00
(d) The Candidate	2157.00	2157.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	133916.88	133916.88
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	6000.00	6000.00
(b) All Other Loans	1000.00	1000.00
(c) TOTAL LOANS (add 13(a) and (b))	7000.00	7000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	124.21	124.21
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	141041.09	141041.09
<b>II. DISBURSEMENTS</b>		
17. OPERATING EXPENDITURES	20780.88	20780.88
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 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	20780.88	20780.88
<b>III. CASH SUMMARY</b>		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		141041.09
25. SUBTOTAL (add Line 23 and Line 24)		141041.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		20780.88
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		120260.21

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11A)

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code SOPHIE DARRAS 2 MEADOWBROOK  DOVER MA 02030	Name of Employer SAMOS IMEX  Occupation TREASURER	Date (month, day, year) 08/31/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Dr. BASIL DARRAS 2 MEADOWBROOK RD  DOVER MA 02030	Name of Employer CHILDREN'S HOSPITAL  Occupation DOCTOR	Date (month, day, year) 08/31/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code MARIA GIANNAROS 100 GAY ST.  WESTWOOD MA 02090	Name of Employer SAMOS IMEX  Occupation PRESIDENT	Date (month, day, year) 08/31/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code IRENE GIANNAROS 1 FANCLAIR DR.  WEST ROXBURY MA 02132	Name of Employer   Occupation RETIRED	Date (month, day, year) 08/31/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code DOLORES MONTI 92 FARMINGTON CHASE  FARMINGTON CT 06032	Name of Employer   Occupation RETIRED	Date (month, day, year) 08/19/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code NICHOLAS PAINDIRIS 119 BUTLER DR.  GLASTONBURY CT 06033	Name of Employer BROWN, PAINDIRIS & SCOTT  Occupation ATTORNEY	Date (month, day, year) 08/23/1997	Amount of Each Receipt this Period 28.99 (IN-KIND)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 319.88		
Full Name, Mailing Address, and ZIP Code GEORGE CHRYSISS 101 KINGS GRANT RD.  WESTON MA 02183	Name of Employer COLLEGESCAPE, INC  Occupation CHAIRMAN	Date (month, day, year) 08/24/1997	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (In Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code GUS TSICHLAS 125 BEAR PAW RD.  STRATFORD CT 06497	Name of Employer PARADISE PIZZA	Date (month, day, year) 09/24/1997	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 300.00	
Full Name, Mailing Address, and ZIP Code CHRISTOS SKABARDONIS 58 MARNEY DR.  MIDDLEBURY CT 06782	Name of Employer TOWN LINE RESTAURANT	Date (month, day, year) 09/24/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code JEAN KONSTANTINO 1215 WOLF HILL RD.  CHESHIRE CT 06410	Name of Employer	Date (month, day, year) 09/24/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation RETIRED	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code ARGYRO TZEPOS 59 OAKWOOD DR.  OXFORD CT 06483	Name of Employer ZOIS PIZZA	Date (month, day, year) 09/24/1997	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 300.00	
Full Name, Mailing Address, and ZIP Code DIMITRIOS DIMOPOULOS 80 SOUTHWEST VILLAGE  FARMINGTON CT 06032	Name of Employer JD'S RESTAURANT	Date (month, day, year) 09/24/1997	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 300.00	
Full Name, Mailing Address, and ZIP Code JOHN KARDARAS 79 PLATT AVE.  WEST HAVEN CT 06516	Name of Employer COUNCIL OF CHURCHES	Date (month, day, year) 08/24/1997	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 350.00	
Full Name, Mailing Address, and ZIP Code NIKOLAOS GIANNAROS 215 CANDY LANE  BROCKTON MA 02401	Name of Employer ATHENA INTERNATIONAL	Date (month, day, year) 09/29/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation PRESIDENT	Aggregate Year-to-Date > \$ 1000.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER  
11A1

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**NAME OF COMMITTEE (in Full)**  
**Giannaros For Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> NICHOLAS PAINDIRIS 119 BUTLER DR  GLASTONBURY CT 06033	<b>Name of Employer</b> BROWN, PAINDIRIS & SCOTT  <b>Occupation</b> ATTORNEY	<b>Date (month, day, year)</b> 10/02/1997	<b>Amount of Each Receipt this Period</b> 83.25 (IN-KIND)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 319.25		
<b>Full Name, Mailing Address, and ZIP Code</b> ANTHONY ROLLAS 24 BINGHAM AVE  DEDHAM MA 02026	<b>Name of Employer</b> P.S.I.  <b>Occupation</b> SUPERVISOR	<b>Date (month, day, year)</b> 10/06/1997	<b>Amount of Each Receipt this Period</b> 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 380.00		
<b>Full Name, Mailing Address, and ZIP Code</b> THEODOROS XANTHOPOULOS 28 PERRY HENDERSON DR  FRAMINGHAM MA 01701	<b>Name of Employer</b> PIZZA WAGON  <b>Occupation</b> RESTAURATEUR	<b>Date (month, day, year)</b> 10/08/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> DOROTHEA DEMAKES 6 BUTTOWOOD LANE  DANVERS MA 01923	<b>Name of Employer</b> JIMMY'S ALLENHURST RESTAURANT  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b> 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> NICHOLAS KAKLEAS 370 WETHERBEE DR.  WESTWOOD MA 02090	<b>Name of Employer</b> C.G.I.  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> ALEX KOLOKYTHAS 35 SOLDMON PIERCE RD  LEXINGTON MA 02173	<b>Name of Employer</b> ALEX REALTY  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> JOANNA TRAKADAS 29 BEAGON ST  NATICK MA 01780	<b>Name of Employer</b>   <b>Occupation</b> RETIRED	<b>Date (month, day, year)</b> 10/08/1997	<b>Amount of Each Receipt this Period</b> 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 400.00		
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
<b>TOTALS This Period (last page this line number only)</b> .....			

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> CHRISTOS PANAGAKIS 26 STONEHILL RD  NORTH CHELMSFORD MA 01863	<b>Name of Employer</b> KASTORI RESTAURANT  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b> 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> ANGELOS DAVOS 1114 WEST ROXBURY PARKWAY  CHESTNUT HILL MA 02167	<b>Name of Employer</b>  <b>Occupation</b> RETIRED	<b>Date (month, day, year)</b> 10/08/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE CHAKALIS 25 BENCLIFF CIR  AUBURNDALE MA 02166	<b>Name of Employer</b> TRIPOLI IMPORTS  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> SAMIRA GIANNAROS 215 CANDY LANE  BROCKTON MA 02401	<b>Name of Employer</b> ATHENA INTERNATIONAL  <b>Occupation</b> FOOD DISTRIBUTOR	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> GABRIEL VIDALIS 75 HIGHLAND ST  HYDE PARK MA 02136	<b>Name of Employer</b> OLYMPIC PIZZA  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 10/06/1997	<b>Amount of Each Receipt this Period</b> 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 550.00		
<b>Full Name, Mailing Address, and ZIP Code</b> JOHN LAGADINOS 29 RAVEN RD  CANTON MA 02021	<b>Name of Employer</b> MED CAP ENGINEERING  <b>Occupation</b> EXECUTIVE	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 570.00		
<b>Full Name, Mailing Address, and ZIP Code</b> ELENI ORFANIDIS 12 GARDNER ST  NEWTON MA 02158	<b>Name of Employer</b>  <b>Occupation</b> HOMEMAKER	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b> 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 400.00		
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
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**NAME OF COMMITTEE (in Full)**  
Glannaros For Congress

Full Name, Mailing Address, and ZIP Code KYRIACOULA VIDALIS 75 HIGHLAND ST  HYDE PARK MA 02136  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer OLYMPIC PIZZA  Occupation OWNER  Aggregate Year-to-Date > \$ 550.00	Date (month, day, year) 10/09/1997	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code PETER PANTAZELOS WOODCOCK LANE  LINCOLN MA 01773  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer THERMO ELECTRON  Occupation VICE PRESIDENT  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/09/1997	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code HARALAMBOS KOSMIDIS P.O. BOX 195B  JAMAICA PLAIN MA 02130  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer SUPER ONE HOUR DRY CLEANER  Occupation DRY CLEANER  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/10/1997	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code SYLVIA POULOS 1898 E. CENTRAL ST  NATICK MA 01760  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer SYLVIA TAILOR SHOP  Occupation DRESSMAKER  Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 10/10/1997	Amount of Each Receipt this Period 350.00
Full Name, Mailing Address, and ZIP Code PLATON VELONIAS 34 BRIARWOOD DR  WESTWOOD MA 02090  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer GUARD INSURANCE AGENCY  Occupation OWNER  Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 10/10/1997	Amount of Each Receipt this Period 400.00
Full Name, Mailing Address, and ZIP Code EMANUEL ROUVELAS 1735 NEW YORK AVE NW  WASHINGTON DC 20006  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer PRESTON, GATES, ET AL, LLP  Occupation CHAIRMAN  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/10/1997	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code JOHN DALLAS 7 BERKLEY CIRCLE  HINGHAM MA 02043  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer HINGHAM DRY CLEANERS  Occupation OWNER  Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 10/10/1997	Amount of Each Receipt this Period 250.00

**SUBTOTALS** of Receipts This Page (Optional) .....

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code NICHOLAS PAINDIRIS 119 BUTLER DR.  GLASTONBURY CT 06033	Name of Employer BROWN, PAINDIRIS & SCOTT	Date (month, day, year) 10/16/1997	Amount of Each Receipt this Period 77.33 (IN-KIND)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 319.88	
Full Name, Mailing Address, and ZIP Code NIKOS KEFALIDIS 155 EAST 56 TH ST  NEW YORK NY 10022	Name of Employer KLM CONSTRUCTION	Date (month, day, year) 10/14/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation PRESIDENT	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code GEORGE CHRYSIS 101 KINGS GRANT RD.  WESTON MA 02193	Name of Employer COLLEGESCAPE, INC	Date (month, day, year) 10/14/1997	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation CHAIRMAN	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code FLORA SOURIS 5 FELLE CIR  WELLESLEY MA 02101	Name of Employer	Date (month, day, year) 10/14/1997	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation RETIRED	Aggregate Year-to-Date > \$ 370.00	
Full Name, Mailing Address, and ZIP Code MARIA KALDIS 1 WATERMILL PLACE  ARLINGTON MA 02174	Name of Employer MED ACCESS CORP	Date (month, day, year) 10/17/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code STEVE ZAFIRIS 170 NO. PLAINS INDUSTRIAL RD.  WALLINGFORD CT 06492	Name of Employer MCDONALD'S	Date (month, day, year) 10/23/1997	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER/OPERATOR	Aggregate Year-to-Date > \$ 1200.00	
Full Name, Mailing Address, and ZIP Code PETER NANOS 12 HOUSTON TER  STAMFORD CT 06902	Name of Employer SELF EMPLOYED	Date (month, day, year) 10/29/1997	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REAL ESTATE	Aggregate Year-to-Date > \$ 300.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> JOHN KARDARAS 78 PLATT AVE.  WEST HAVEN CT 06516  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> COUNCIL OF CHURCHES  <b>Occupation</b> ATTORNEY  Aggregate Year-to-Date > \$ 350.00	<b>Date (month, day, year)</b> 10/29/1997	<b>Amount of Each Receipt this Period</b> 100.00
<b>Full Name, Mailing Address, and ZIP Code</b> ORESTES DEMETRIADES 24 OAKLEY RD  BELMONT MA 02178  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> INTERNATIONAL ECHOES  <b>Occupation</b> OWNER  Aggregate Year-to-Date > \$ 300.00	<b>Date (month, day, year)</b> 10/29/1997	<b>Amount of Each Receipt this Period</b> 100.00
<b>Full Name, Mailing Address, and ZIP Code</b> DIMITRIOS DIMOPOULOS 80 SOUTHWEST VILLAGE  FARMINGTON CT 06032  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> JO'S RESTAURANT  <b>Occupation</b> OWNER  Aggregate Year-to-Date > \$ 300.00	<b>Date (month, day, year)</b> 10/31/1997	<b>Amount of Each Receipt this Period</b> 100.00
<b>Full Name, Mailing Address, and ZIP Code</b> JAMES ZAFIRIS 85 SETTER HILL RD  WALLINGFORD CT 06492  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> DUNKIN DONUTS  <b>Occupation</b> OWNER/OPERATOR  Aggregate Year-to-Date > \$ 300.00	<b>Date (month, day, year)</b> 10/31/1997	<b>Amount of Each Receipt this Period</b> 300.00
<b>Full Name, Mailing Address, and ZIP Code</b> EMMANUEL PERDIKES 44 UPLANDS DR  WEST HARTFORD CT 06107  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> CIMC  <b>Occupation</b> INSURANCE  Aggregate Year-to-Date > \$ 250.00	<b>Date (month, day, year)</b> 10/31/1997	<b>Amount of Each Receipt this Period</b> 200.00
<b>Full Name, Mailing Address, and ZIP Code</b> MICHAEL BIKAKIS 44 DENNISON RIDGE  WETHERSFIELD CT 06109  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b>   <b>Occupation</b> RETIRED  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 10/31/1997	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> CHARLES PAINDIRIS 146 CLOVERCREST RD  WETHERSFIELD CT 06109  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> EFFIE'S RESTAURANT  <b>Occupation</b> OWNER  Aggregate Year-to-Date > \$ 320.00	<b>Date (month, day, year)</b> 10/31/1997	<b>Amount of Each Receipt this Period</b> 200.00
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> MICHAEL ECONOMOS 6 CYPRESS RD  WEST HARTFORD CT 06117  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> BECON ENTERPRISES  <b>Occupation</b> PRESIDENT  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 10/31/1997	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> MARKOS HATZIKOSTANTIS 168 HANG DOG LN  WETHERSFIELD CT 06119  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> M & M TRAVEL  <b>Occupation</b> TRAVEL SERVICES  <b>Aggregate Year-to-Date</b> > \$ 350.00	<b>Date (month, day, year)</b> 10/31/1997	<b>Amount of Each Receipt this Period</b> 300.00
<b>Full Name, Mailing Address, and ZIP Code</b> AKILAS TONONIS 203 CANDLELIGHT DR  GLASTONBURY CT 06033  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> REAL ESTATE  <b>Aggregate Year-to-Date</b> > \$ 360.00	<b>Date (month, day, year)</b> 10/31/1997	<b>Amount of Each Receipt this Period</b> 300.00
<b>Full Name, Mailing Address, and ZIP Code</b> CHARLES TRIANTAFILLES 107 MADISON AVE  NEWTONVILLE MA 02160  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> NEWTONVILLE HOUSE OF PIZZA  <b>Occupation</b> OWNER  <b>Aggregate Year-to-Date</b> > \$ 400.00	<b>Date (month, day, year)</b> 11/03/1997	<b>Amount of Each Receipt this Period</b> 400.00
<b>Full Name, Mailing Address, and ZIP Code</b> HARRIS KATIS 25 VALLEY RD  ARLINGTON MA 02174  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> THE FISHERY  <b>Occupation</b> OWNER  <b>Aggregate Year-to-Date</b> > \$ 515.00	<b>Date (month, day, year)</b> 11/05/1997	<b>Amount of Each Receipt this Period</b> 515.00 (IN-KIND)
<b>Full Name, Mailing Address, and ZIP Code</b> NICHOLAS PAINDIRIS 119 BUTLER DR  GLASTONBURY CT 06033  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> BROWN, PAINDIRIS & SCOTT  <b>Occupation</b> ATTORNEY  <b>Aggregate Year-to-Date</b> > \$ 319.88	<b>Date (month, day, year)</b> 11/07/1997	<b>Amount of Each Receipt this Period</b> 52.31 (IN-KIND)
<b>Full Name, Mailing Address, and ZIP Code</b> ELIAS KAFANTARIS 21477 LITTLE BROOK WAY  STORNGSVILLE OH 44138  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> RESTAURATEUR  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 11/10/1997	<b>Amount of Each Receipt this Period</b> 250.00

**SUBTOTALS** of Receipts This Page (Optional) .....

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE SERVETAS 31204 WELLNER RD  WILLOWICK OH 44085  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> RESTAURATEUR  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 11/10/1997	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE SALAMALEKIS 23799 DELMERE  NORTH OLMSTED OH 44070  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b>   <b>Occupation</b> RETIRED  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 11/10/1997	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> STEVE SALAMALEKIS 21700 HILLIARD BLVD  ROCKY RIVER OH 44116  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b>   <b>Occupation</b> RETIRED  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 11/10/1997	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> PETER FOUSTANELLAS 25-40 STEINWAY ST  ASTORIA NY 11103  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> ANATOLIAN CARPETS  <b>Occupation</b> SALES  <b>Aggregate Year-to-Date</b> > \$ 850.00	<b>Date (month, day, year)</b> 11/11/1997	<b>Amount of Each Receipt this Period</b> 150.00 (IN-KIND)
<b>Full Name, Mailing Address, and ZIP Code</b> MANOS FOUSTANELLAS 43-07 23RD AVE  ASTORIA NY 11105  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> GRECIAN RESTAURANT  <b>Occupation</b> OWNER  <b>Aggregate Year-to-Date</b> > \$ 350.00	<b>Date (month, day, year)</b> 11/11/1997	<b>Amount of Each Receipt this Period</b> 250.00 (IN-KIND)
<b>Full Name, Mailing Address, and ZIP Code</b> EMANUEL MAVROIDES 44-07 30TH AVE  ASTORIA NY 11103  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> FIRST AVE PIZZERIA  <b>Occupation</b> OWNER  <b>Aggregate Year-to-Date</b> > \$ 815.00	<b>Date (month, day, year)</b> 11/11/1997	<b>Amount of Each Receipt this Period</b> 815.00 (IN-KIND)
<b>Full Name, Mailing Address, and ZIP Code</b> ORESTES DEMETRIADES 24 OAKLEY RD  BELMONT MA 02178  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Name of Employer</b> INTERNATIONAL ECHOES  <b>Occupation</b> OWNER  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 11/12/1997	<b>Amount of Each Receipt this Period</b> 200.00

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> Dr. JAMES KALLINS 15747 S. WOODRUFF AVE  BELLFLOWER CA 90706	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> DOCTOR	<b>Date (month, day, year)</b> 11/12/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> KYRIACOULA VIDALIS 75 HIGHLAND ST  HYDE PARK MA 02136	<b>Name of Employer</b> OLYMPIC PIZZA  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 11/12/1997	<b>Amount of Each Receipt this Period</b> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 550.00		
<b>Full Name, Mailing Address, and ZIP Code</b> GABRIEL VIDALIS 75 HIGHLAND ST  HYDE PARK MA 02136	<b>Name of Employer</b> OLYMPIC PIZZA  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 11/12/1997	<b>Amount of Each Receipt this Period</b> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 550.00		
<b>Full Name, Mailing Address, and ZIP Code</b> PETER DRESCHER 7111 THORNTREE HILL DR  FAYETTEVILLE NY 13088	<b>Name of Employer</b> DRESCHER CORP.  <b>Occupation</b> PRESIDENT	<b>Date (month, day, year)</b> 11/12/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> PETER FOUSTANELLAS 25-40 STEINWAY ST  ASTORIA NY 11103	<b>Name of Employer</b> ANATOLIAN CARPETS  <b>Occupation</b> SALES	<b>Date (month, day, year)</b> 11/17/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 650.00		
<b>Full Name, Mailing Address, and ZIP Code</b> SOTIROU VASTAKIS 2208 STATE ST  HAMDEN CT 06517	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> RESTAURATEUR	<b>Date (month, day, year)</b> 11/18/1997	<b>Amount of Each Receipt this Period</b> 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 400.00		
<b>Full Name, Mailing Address, and ZIP Code</b> MARIA KODOGIANNIS 330 MCGUINNESS BLVD  BROOKLYN NY 11222	<b>Name of Employer</b> MYSTIC BROKERAGE INC.  <b>Occupation</b> SALES	<b>Date (month, day, year)</b> 11/19/1997	<b>Amount of Each Receipt this Period</b> 700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 700.00		
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
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**NAME OF COMMITTEE (In Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code DIMITRIOS DIMOPOULOS 80 SOUTHWEST VILLAGE  FARMINGTON CT 06032	Name of Employer JD'S RESTAURANT	Date (month, day, year) 11/19/1997	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 300.00	
Full Name, Mailing Address, and ZIP Code EMMANUEL PSARAS 48 WYNGATE DR  AVON CT 06001	Name of Employer GEORGE'S PIZZA	Date (month, day, year) 11/19/1997	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 400.00	
Full Name, Mailing Address, and ZIP Code NICK GEORGE 36 BLUE RIDGE RD  KENSINGTON CT 06037	Name of Employer CONNECTICUT FURS INC	Date (month, day, year) 11/19/1997	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation EXECUTIVE	Aggregate Year-to-Date > \$ 350.00	
Full Name, Mailing Address, and ZIP Code JOHN DALLAS 7 BERKLEY CIRCLE  HINGHAM MA 02043	Name of Employer HINGHAM DRY CLEANERS	Date (month, day, year) 11/24/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 750.00	
Full Name, Mailing Address, and ZIP Code GREGORY LOLES 925 GRASSY HILL RD  ORANGE CT 06477	Name of Employer APEIRON CAPITAL	Date (month, day, year) 11/24/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation INVESTMENT ADVISOR	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code GEORGE ALMIROUDIS 42-20 ASTORIA BLVD  ASTORIA NY 11103	Name of Employer MESTA RESTORATION	Date (month, day, year) 11/24/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation PRESIDENT	Aggregate Year-to-Date > \$ 800.00	
Full Name, Mailing Address, and ZIP Code NIKOLAS PANAGOPOULOS 17 WOOLEY LANE  FOXBORO MA 02035	Name of Employer DIMITRIS CONVENTION CENTER	Date (month, day, year) 11/29/1997	Amount of Each Receipt this Period 475.00 (IN-KIND)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 475.00	

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code DIMITRIS PANAGOPOULOS 17 WOOLEY LANE FOXBORO MA 02035	Name of Employer DIMITRIS CONVENTION CENTER	Date (month, day, year) 11/29/1997	Amount of Each Receipt this Period 475.00 (MARKIND)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 475.00	
Full Name, Mailing Address, and ZIP Code CONSTANTINE MACRICOSTAS P.O. BOX 5228 BROOKFIELD CT 06804	Name of Employer PHOTRONICS	Date (month, day, year) 12/01/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation CHAIRMAN	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code EMMANUEL PERDIKES 44 UPLANDS DR WEST HARTFORD CT 06107	Name of Employer CIMC	Date (month, day, year) 12/01/1997	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation INSURANCE	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code ANTHONY ROLLAS 24 BINGHAM AVE DEDHAM MA 02026	Name of Employer P.S.I.	Date (month, day, year) 12/01/1997	Amount of Each Receipt this Period 210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation SUPERVISOR	Aggregate Year-to-Date > \$ 360.00	
Full Name, Mailing Address, and ZIP Code JOANNA TRAKADAS 29 BEACON ST NATICK MA 01760	Name of Employer	Date (month, day, year) 12/01/1997	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation RETIRED	Aggregate Year-to-Date > \$ 400.00	
Full Name, Mailing Address, and ZIP Code VINCENT SABATINI 6 HINCHLEY WOOD FARMINGTON CT 06032	Name of Employer SABATINI & ASSOCIATES	Date (month, day, year) 12/01/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code CHARLES MARANGOUDAKIS 837 RT 25-A MILLER PLACE NY 11764	Name of Employer MARANGOS CONSTRUCTION CORP	Date (month, day, year) 12/03/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation PRESIDENT	Aggregate Year-to-Date > \$ 500.00	

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code KASSIA RISK 18 FRANCLAIRE DRIVE WEST ROXBURY MA 02132	Name of Employer	Date (month, day, year) 12/03/1997	Amount of Each Receipt this Period 500.00
	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code JOHN LAGADIMOS 29 RAVEN RD CANTON MA 02021	Name of Employer	Date (month, day, year) 12/03/1997	Amount of Each Receipt this Period 70.00
	Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 570.00		
Full Name, Mailing Address, and ZIP Code FLORA SOURIS 5 FELS CIR WELLESLEY MA 02181	Name of Employer	Date (month, day, year) 12/03/1997	Amount of Each Receipt this Period 70.00
	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 370.00		
Full Name, Mailing Address, and ZIP Code MANOS FOUSTANELLAS 43-07 23RD AVE ASTORIA NY 11105	Name of Employer	Date (month, day, year) 12/03/1997	Amount of Each Receipt this Period 100.00
	Occupation OWNER		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
Full Name, Mailing Address, and ZIP Code PETER FOUSTANELLAS 25-40 STEINWAY ST ASTORIA NY 11103	Name of Employer	Date (month, day, year) 12/03/1997	Amount of Each Receipt this Period 200.00
	Occupation SALES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 850.00		
Full Name, Mailing Address, and ZIP Code GEORGE ALMIROUDIS 42-20 ASTORIA BLVD ASTORIA NY 11103	Name of Employer	Date (month, day, year) 12/03/1997	Amount of Each Receipt this Period 300.00
	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 800.00		
Full Name, Mailing Address, and ZIP Code PHILIP CHRISTOPHER 4 STEPPING STONE CREST DIX HILLS NY 11748	Name of Employer	Date (month, day, year) 12/03/1997	Amount of Each Receipt this Period 1000.00
	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> SAVAS TSIVICOS 524 GREEN GROVE RD  WAYSIDE NJ 07712	<b>Name of Employer</b> PSEKA (USA)	<b>Date (month, day, year)</b> 12/03/1997	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> VICE PRESIDENT	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> NIKOS MOUYIARIS 32-02 QUEENS BLVD  LONG ISLAND CITY NY 11101	<b>Name of Employer</b> MANA PRODUCTS	<b>Date (month, day, year)</b> 12/03/1997	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> PRESIDENT	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE COUMANTAROS 944 FIFTH AVE  NEW YORK NY 10021	<b>Name of Employer</b> SOUTHERN STAR SHIPPING CO.	<b>Date (month, day, year)</b> 12/03/1997	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> EXECUTIVE	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> EVA DIMOPOULOS 80 SOUTHWEST VILLAGE  FARMINGTON CT 06032	<b>Name of Employer</b> JD'S RESTAURANT	<b>Date (month, day, year)</b> 12/03/1997	<b>Amount of Each Receipt this Period</b> 275.00 (IN-KIND)
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> OWNER	<b>Aggregate Year-to-Date</b> > \$ 275.00	
<b>Full Name, Mailing Address, and ZIP Code</b> JASON BIKAKIS 6 BROWNSTONE RD  BERLIN CT 06037	<b>Name of Employer</b> BERLIN PIZZA	<b>Date (month, day, year)</b> 12/08/1997	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> OWNER	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> AKILAS TOTONIS 203 CANDLELIGHT DR  GLASTONBURY CT 06033	<b>Name of Employer</b> SELF EMPLOYED	<b>Date (month, day, year)</b> 12/08/1997	<b>Amount of Each Receipt this Period</b> 80.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> REAL ESTATE	<b>Aggregate Year-to-Date</b> > \$ 360.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MICHAEL BIKAKIS 44 DENNISON RIDGE  WETHERSFIELD CT 06109	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 12/08/1997	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> RETIRED	<b>Aggregate Year-to-Date</b> > \$ 1000.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

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SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	17 / 38
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NAME OF COMMITTEE (In Full) Giannaros For Congress					
Full Name, Mailing Address, and ZIP Code CHARLES PAINDIRIS 148 CLOVERCREST RD  WETHERSFIELD CT 06109		Name of Employer EFFIE'S RESTAURANT		Date (month, day, year) 12/08/1997	Amount of Each Receipt this Period 120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Occupation OWNER		Aggregate Year-to-Date > \$ 320.00	
Full Name, Mailing Address, and ZIP Code NICHOLAS PAINDIRIS 119 BUTLER DR  GLASTONBURY CT 06033		Name of Employer BROWN, PAINDIRIS & SCOTT		Date (month, day, year) 12/08/1997	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Occupation ATTORNEY		Aggregate Year-to-Date > \$ 319.88	
Full Name, Mailing Address, and ZIP Code Dr. NICKOLAOS GALAKOS 45 WEST 80 TH ST  NEW YORK NY 10023		Name of Employer SELF EMPLOYED		Date (month, day, year) 12/08/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Occupation DOCTOR		Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code JOHN BRUNETTI 250B HEMPSTED TPKE  EAST MEADOW NY 11554		Name of Employer PARKWAY CORP		Date (month, day, year) 12/08/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Occupation EXECUTIVE		Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code ARTHUR KOUMANTEZELIS 38 ROUND HILL RD  LINCOLN MA 01773		Name of Employer GUMBERLAND FARMS		Date (month, day, year) 12/10/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Occupation SR. VICE PRESIDENT		Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code MARKOS HATZIKOSTANTIS 189 HANG DOG LN  WETHERSFIELD CT 06119		Name of Employer M & M TRAVEL		Date (month, day, year) 12/12/1997	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Occupation TRAVEL SERVICES		Aggregate Year-to-Date > \$ 350.00	
Full Name, Mailing Address, and ZIP Code MARY ZAFIRIS 170 NO. PLAINS INDUSTRIAL RD  WALLINGFORD CT 06492		Name of Employer		Date (month, day, year) 12/12/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Occupation HOMEMAKER		Aggregate Year-to-Date > \$ 1000.00	
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> GERALD HAVEL 6 F TALCOTT RIDGE RD  FARMINGTON CT 06032	<b>Name of Employer</b> BERLIN BOARD OF EDUCATION	<b>Date (month, day, year)</b> 12/12/1997	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> TEACHER	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> DIMITRIOS SOUTOS 8454 W. 28TH ST  PARMA OH 44134	<b>Name of Employer</b> STAR PROVISION	<b>Date (month, day, year)</b> 12/13/1997	<b>Amount of Each Receipt this Period</b> 600.00 (IN-KIND)
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> FOOD DISTRIBUTOR	<b>Aggregate Year-to-Date</b> > \$ 600.00	
<b>Full Name, Mailing Address, and ZIP Code</b> TONY KOSKERIDES ORCHARD HILL RD  WESTPORT CT 06880	<b>Name of Employer</b> PENNY'S RESTAURANT	<b>Date (month, day, year)</b> 12/15/1997	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> OWNER	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> BARBARA BRENNEMAN 112 LOVELY ST  UNIONVILLE CT 06085	<b>Name of Employer</b> LEADERS REAL ESTATE	<b>Date (month, day, year)</b> 12/17/1997	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> REALTOR/PARTNER	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ANDREW KARPOUZIS 43 KATHRYN ST  ASHLAND MA 01721	<b>Name of Employer</b> KCR	<b>Date (month, day, year)</b> 12/17/1997	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> SELF EMPLOYED	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> LIZABETH HASKOS 31 CLIFFSIDE DR  WALLINGFORD CT 06492	<b>Name of Employer</b> MCDONALD'S	<b>Date (month, day, year)</b> 12/17/1997	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> OWNER/OPERATOR	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> PANAGIOTIS PAPANICOLAOU 44 89TH ST  BROOKLYN NY 11209	<b>Name of Employer</b> J.F. CONTRACTING	<b>Date (month, day, year)</b> 12/17/1997	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> VICE PRESIDENT	<b>Aggregate Year-to-Date</b> > \$ 1000.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

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

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	19 / 38
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<b>NAME OF COMMITTEE (in Full)</b> Giannaros For Congress					
Full Name, Mailing Address, and ZIP Code RAD SINGAMSETTI 18 HICKORY HILL RD  SIMSBURY CT 06070		Name of Employer UNIVERSITY OF HARTFORD  Occupation PROFESSOR		Date (month, day, year) 12/17/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code VENKAT GADE 33 CALF POND LANE  FAIRFIELD CT 06430		Name of Employer TUDOR INVESTMENTS  Occupation ANALYST		Date (month, day, year) 12/17/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code JOHN KARDARAS 79 PLATT AVE.  WEST HAVEN CT 06516		Name of Employer COUNCIL OF CHURCHES  Occupation ATTORNEY		Date (month, day, year) 12/17/1997	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Aggregate Year-to-Date > \$ 350.00			
Full Name, Mailing Address, and ZIP Code SOTIROS VASTAKIS 2208 STATE ST  HAMDEN CT 06517		Name of Employer SELF EMPLOYED  Occupation RESTAURATEUR		Date (month, day, year) 12/17/1997	Amount of Each Receipt this Period 375.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Aggregate Year-to-Date > \$ 400.00			
Full Name, Mailing Address, and ZIP Code STEVE ZAFIRIS 170 NO. PLAINS INDUSTRIAL RD.  WALLINGFORD CT 06492		Name of Employer MCDONALD'S  Occupation OWNER/OPERATOR		Date (month, day, year) 12/19/1997	Amount of Each Receipt this Period 800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Aggregate Year-to-Date > \$ 1200.00			
Full Name, Mailing Address, and ZIP Code STEVE ZAFIRIS 170 NO. PLAINS INDUSTRIAL RD.  WALLINGFORD CT 06492		Name of Employer MCDONALD'S  Occupation OWNER/OPERATOR		Date (month, day, year) 12/19/1997	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1200.00			
Full Name, Mailing Address, and ZIP Code CHRISTO COCAINE 448 MAIN ST  WORCESTER MA 01908		Name of Employer TABLE TALK PIES  Occupation EXECUTIVE		Date (month, day, year) 12/19/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		Aggregate Year-to-Date > \$ 250.00			
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....					
<b>TOTALS This Period (last page this line number only)</b> .....					

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**NAME OF COMMITTEE (in Full)**  
**Glannaros For Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> LENNY SANCHEZ 70 CRESCENT DR  CHICOPEE MA 01013	<b>Name of Employer</b> ANGELO'S RESTAURANT	<b>Date (month, day, year)</b> 12/19/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> RESTAURATEUR		
		Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> SYLVIA LAZARIDES 70 CRESCENT DR  CHICOPEE MA 01013	<b>Name of Employer</b> ANGELO'S RESTAURANT	<b>Date (month, day, year)</b> 12/19/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> HOMEMAKER		
		Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ARIS ANAGNOS 8124 W. THIRD ST  LOS ANGELES CA 90048	<b>Name of Employer</b> SELF EMPLOYED	<b>Date (month, day, year)</b> 12/19/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> REALTOR		
		Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE TSILIFIDIS 20 BROOKFIELD ST  NORWALK CT 06851	<b>Name of Employer</b> GT ELECTRIC	<b>Date (month, day, year)</b> 12/19/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> ELECTRICIAN		
		Aggregate Year-to-Date > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> JULIANA LAZARIDES 36 LEXINGTON RD  GLASTONBURY CT 06033	<b>Name of Employer</b> ANGELO'S RESTAURANT	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> OWNER		
		Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ANGELO LAZARIDES 36 LEXINGTON RD  GLASTONBURY CT 06033	<b>Name of Employer</b> ANGELO'S RESTAURANT	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> OWNER		
		Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> JOHN HAMILTON 18 SOUTH RIDGE  FARMINGTON CT 06032	<b>Name of Employer</b> HAMILTON & ASSOCIATES	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Occupation</b> ATTORNEY		
		Aggregate Year-to-Date > \$ 500.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Glannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> NICK GEORGE 36 BLUE RIDGE RD  KENSINGTON CT 06037	<b>Name of Employer</b> CONNECTICUT FURS INC  <b>Occupation</b> EXECUTIVE	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 350.00		
<b>Full Name, Mailing Address, and ZIP Code</b> PETER CALOYERAS 2041 WEST 139 TH ST  GARDENA CA 90249	<b>Name of Employer</b> MAGNETIKA INC.  <b>Occupation</b> EXECUTIVE	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> THEODORE KONSTANTINO 1215 WOLF HILL RD  CHESHIRE CT 06410	<b>Name of Employer</b>   <b>Occupation</b> RETIRED	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> BERNICE COUMOUNDUROS 4 ATWOOD AVE  STONEHAM MA 02180	<b>Name of Employer</b> CARGO TRANSPORT  <b>Occupation</b> BOOKKEEPER	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> CAROL BREAKEY 8 BELGRAVIA TER  FARMINGTON CT 06032	<b>Name of Employer</b>   <b>Occupation</b> HOMEMAKER	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> ANDREAS SAVVIDIS 210 CONNECTICUT AVE  NORWALK CT 08854	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> REAL ESTATE	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> YANNIS MELANIDIS 78 HIGHLAND COURT  WEST HAVEN CT 06516	<b>Name of Employer</b> CROSSROAD RESTAURANT  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Receipt this Period</b> 300.00 (IN-KIND)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 300.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (in Full)**  
**Glannaros For Congress**

Full Name, Mailing Address, and ZIP Code CHRISTOS LIAPOPOULOS 632 BELMONT ST  BROCKTON MA 02401	Name of Employer GATAX INC.  Occupation ACCOUNTANT	Date (month, day, year) 12/24/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code BETSY SAMS 40 PRATLING POND RD  FARMINGTON CT 06032	Name of Employer  Occupation RETIRED	Date (month, day, year) 12/24/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code EMMANUEL PSARAS 48 WYNGATE DR  AVON CT 06001	Name of Employer GEORGE'S PIZZA  Occupation OWNER	Date (month, day, year) 12/24/1997	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code THOMAS SOUTOS 21281 ARCADIA COURT ASHBURN VILLAGE ASHBURN VA 20147	Name of Employer  Occupation RETIRED	Date (month, day, year) 12/24/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code CHRIS TOMARAS 3950 S. KARLOV  CHICAGO IL 60632	Name of Employer TOMARAS INVESTMENTS LTD.  Occupation OWNER	Date (month, day, year) 12/24/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code JOHN PHILOPOULOS ASSOCIATES 200 STUART ST  BOSTON MA 02116	Name of Employer (PARTNERSHIP)  Occupation	Date (month, day, year) 12/24/1997  SEE AT RIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code NICHOLAS VINIOS 200 STUART ST  BOSTON MA 02116	Name of Employer JOHN PHILOPOULOS ASSOCIATES  Occupation REALTY MANAGEMENT	Date (month, day, year) 12/24/1997	Amount of Each Receipt this Period 1000.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Aggregate Year-to-Date > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER  
11A1

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**NAME OF COMMITTEE (in Full)**  
Glannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> STEVEN MILES 3 SOUTH RIDGE RD  FARMINGTON CT 06032	<b>Name of Employer</b> NATIONWIDE INSURANCE  <b>Occupation</b> MANAGER	<b>Date (month, day, year)</b> 12/29/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> WILLIAM CROMACK 4 WANNOWMASSA RD  FARMINGTON CT 06032	<b>Name of Employer</b> FARMINGTON CAR WASH  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 12/29/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE CHRYSISS 101 KINGS GRANT RD.  WESTON MA 02193	<b>Name of Employer</b> COLLEGESCAPE, INC  <b>Occupation</b> CHAIRMAN	<b>Date (month, day, year)</b> 12/29/1997	<b>Amount of Each Receipt this Period</b> 850.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> CHRISTOS PAPOUSTY 2234 OCEAN BLVD  RYE BEACH NH 03871	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> ARBITRATOR	<b>Date (month, day, year)</b> 12/29/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> MARIA GEROLIMATOS 270 COLUMBIA AVE  FORT LEE NJ 07024	<b>Name of Employer</b> 3 STAR BAGEL  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 12/29/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> MICHAEL TARTSINIS 6 MCCULLOCH DR  SOMERS CT 06071	<b>Name of Employer</b> AMF PROPERTY MANAGEMENT  <b>Occupation</b> PRESIDENT	<b>Date (month, day, year)</b> 12/29/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> LAZAROS SALTOURIDES 370 MARSH RD  NORTHFIELD CT 06207	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> RESTAURATEUR	<b>Date (month, day, year)</b> 12/29/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (In Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> JAMES ECONOMOU 331 GRAEMERE  NORTHFIELD ID 80093	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> ARCHITECT	<b>Date (month, day, year)</b> 12/23/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE BEHRAKIS 426 RIVER RD  NORTH TEWKSBURY MA 01876	<b>Name of Employer</b> MURO PHARMACEUTICAL  <b>Occupation</b> EXECUTIVE	<b>Date (month, day, year)</b> 12/23/1997	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE COUCUNAS 35 SINGLETREE RD  CHESTNUT HILL MA 02167	<b>Name of Employer</b> SELF EMPLOYED  <b>Occupation</b> ATTORNEY/CPA	<b>Date (month, day, year)</b> 12/23/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> EILEEN MARKS 23 BRIAR HILL RD  FARMINGTON CT 06032	<b>Name of Employer</b> REID & REIGE, P.C.  <b>Occupation</b> ATTORNEY	<b>Date (month, day, year)</b> 12/23/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> EDWARD MIKOLOWSKI 23 BRIAR HILL RD  FARMINGTON CT 06032	<b>Name of Employer</b> REID & REIGE, P.C.  <b>Occupation</b> ATTORNEY	<b>Date (month, day, year)</b> 12/23/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> GEORGE BERGETIS 64 ALVORD LN  STAMFORD CT 06902	<b>Name of Employer</b> ATHENS PIZZA  <b>Occupation</b> OWNER	<b>Date (month, day, year)</b> 12/30/1997	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> KALLIOPi KOUKOUNARIS 63 WILLOW RD  NAHANT MA 01908	<b>Name of Employer</b>   <b>Occupation</b> HOMEMAKER	<b>Date (month, day, year)</b> 12/30/1997	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Aggregate Year-to-Date</b> > \$ 250.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code CATHY PAGOULIAS- SAKELLARIS 64 BRUNSWICK ST  NORTH QUINCY MA 02171  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer PENDLETON JAMES  Occupation CONSULTANT  Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code TED SPYROPOULOS 2156 W. 80 TH ST  CHICAGO IL 60620  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer CAM2 MIDWEST  Occupation PRESIDENT  Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code TED SPYROPOULOS 2155 W. 80 TH ST  CHICAGO IL 60620  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer CAM2 MIDWEST  Occupation PRESIDENT  Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code ANTHONY PERRI 391 MIDDLE RD  FARMINGTON CT 06032  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer PERRI INSURANCE AGENCY  Occupation OWNER  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code ANN MARIE GOMEZ 15 WHITE OAK RD  FARMINGTON CT 06032  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer   Occupation HOMEMAKER  Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code 234 S. WABASH BLDG L.P. 234 S. WABASH 2ND FLOOR  CHICAGO IL 60604  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer (PARTNERSHIP)  Occupation   Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/31/1997  SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code STELLA BEBONIS 1414 FLEMING ST  ARLINGTON HEIGHTS IL 60004  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Name of Employer BEBON OFFICE MACHINES  Occupation OWNER  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 250.00 MEMO

**SUBTOTALS** of Receipts This Page (Optional) .....

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code BILL BEBONIS 1414 FLEMING ST  ARLINGTON HEIGHTS IL 60004	Name of Employer BEBON OFFICE MACHINES	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 250.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code RAYMOND BACHMAN 2 WOODS RUN  FARMINGTON CT 06032	Name of Employer EASTERN CT STATE UNIVERSITY	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation DIR. OF PUBLIC AFFAIRS	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code NORMAN COUCH 73 BLUE RIDGE DR  SIMSBURY CT 06070	Name of Employer SELF EMPLOYED	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation CAR WASH OPERATOR	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Dr. ZANNIS KALAMS 74 CASE ST  NORWICH CT 06360	Name of Employer SELF EMPLOYED	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation DOCTOR	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code PETER NANOS 12 HOUSTON TER  STAMFORD CT 06902	Name of Employer SELF EMPLOYED	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation REAL ESTATE	Aggregate Year-to-Date > \$ 300.00	
Full Name, Mailing Address, and ZIP Code MANOUEL HATZIOANNOU 100 ELLIOTT ST  DANVERS MA 01923	Name of Employer GLAMOUR FURS	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation OWNER	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code HARRY PAPPAS 500 S. CHINWORTH  VISALIA CA 93277	Name of Employer PAPPAS TELECASTING CORP	Date (month, day, year) 12/31/1997	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	Occupation CEO	Aggregate Year-to-Date > \$ 1000.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

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

74704.88

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	27 / 38
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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

<b>Full Name, Mailing Address, and ZIP Code</b> FRIENDS OF JOHN O'TOOLE 65 WASHINGTON AVE  SEYMOUR CT 06483	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/09/1997	<b>Amount of Each Receipt this Period</b>  100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		<b>Aggregate Year-to-Date</b> > \$ 100.00	

<b>Full Name, Mailing Address, and ZIP Code</b> UFCW UNION LOCAL 919 PAC 6 HYDE RD  FARMINGTON CT 06032	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 12/01/1997	<b>Amount of Each Receipt this Period</b>  200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		<b>Aggregate Year-to-Date</b> > \$ 200.00	

<b>SUBTOTALS</b> of Receipts This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>300.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

**Full Name, Mailing Address, and ZIP Code**

Prof. Demetrios Giannaros  
56 Basswood Road

Farmington CT 06032

**Name of Employer**

University of Hartford

**Date (month, day, year)**

12/31/1997

**Amount of Each Receipt this Period**

2167.00

(IN-KIND)

**Occupation**

Professor

Receipt For:

Primary

General

Other (specify): Convention

Aggregate Year-to-Date \$ 2167.00

**SUBTOTALS** of Receipts This Page (Optional) .....

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

2167.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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FOR LINE NUMBER 13A

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

**Full Name, Mailing Address, and ZIP Code**

Prof. Demetrios Giannaros  
56 Basswood Road

Farmington CT 06032

**Name of Employer**

University of Hartford

**Date (month, day, year)**

12/31/1997

**Amount of Each Receipt this Period**  
8000.00

**Occupation**

Professor

Receipt For:

Primary

General

Other (specify): Convention

Aggregate Year-to-Date > \$ 6000.00

**SUBTOTALS** of Receipts This Page (Optional) .....

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

8000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
**Giannaros For Congress**

Full Name, Mailing Address, and ZIP Code

ELIZABETH GIANNAROS  
58 BASSWOOD RD

FARMINGTON CT 06032

Name of Employer

Date (month,  
day, year)

08/31/1997

Amount of Each  
Receipt this Period

1000.00

Occupation

HOMEMAKER

Receipt For:  Primary  General

Other (specify): *Convention*

Aggregate Year-to-Date > 3 1000.00

SUBTOTALS of Receipts This Page (Optional) .....

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

1000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**  
Giannaros For Congress

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BRINK ASSOCIATES 1276 HOPMEADOW ST  SIMSBURY CT 06070	LAPEL STICKERS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	09/02/1997	358.25
TOWN LINE RESTAURANT 280 PROSPECT RD  CHESHIRE CT 06410	FOOD/BEVERAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	09/22/1997	258.58
NICHOLAS PAINDIRIS 119 BUTLER DR  GLASTONBURY CT 06033	FOOD/BEVERAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	09/23/1997	28.99 (IN-KIND)
ACE PRINTERY, INC. 41 WALNUT ST.  HARTFORD CT 06120	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	09/28/1997	1227.48
U.S. POST OFFICE 210 MAIN ST  FARMINGTON CT 06032	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	09/30/1997	161.33
SNET P.O. BOX 1881  NEW HAVEN CT 06508	TELEPHONE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	09/30/1997	192.65
APRESS, INC. 1 LENOLA DR  FARMINGTON CT 06032	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	09/30/1997	1305.92
NICHOLAS PAINDIRIS 118 BUTLER DR  GLASTONBURY CT 06033	FOOD/BEVERAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/02/1997	63.25 (IN-KIND)
M&M TRAVEL SERVICE, INC. 844 SILAS DEANE HIGHWAY  WETHERSFIELD CT 06109	AIRFARE TO WASHINGTON D.C. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/10/1997	377.38

**SUBTOTALS** of Disbursements This Page (Optional) .....

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (in Full)**  
**Glannaros For Congress**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NICHOLAS PAINDIRIS 119 BUTLER DR GLASTONBURY CT 06033	SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/10/1997	77.33 (IN-KIND)
ACE PRINTERY, INC. 41 WALNUT ST. HARTFORD CT 06120	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/11/1997	433.54
U.S. POST OFFICE 210 MAIN ST FARMINGTON CT 06032	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/11/1997	320.00
U.S. POST OFFICE 210 MAIN ST FARMINGTON CT 06032	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/20/1997	98.00
ANGELLINOS RESTAURANT 1115 SILAS DEANE HIGHWAY WETHERSFIELD CT 06109	FOOD/BEVERAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/27/1997	300.00
STAPLES 15 ALBANY TPKE SIMSBURY CT 06092	CAMPAIGN OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/31/1997	13.77
SNET P.O. BOX 1861 NEW HAVEN CT 06508	TELEPHONE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	10/31/1997	148.08
APRESS, INC. 1 LENOLA DR FARMINGTON CT 06032	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/03/1997	313.65
HARRIS KATIS 28 VALLEY RD ARLINGTON MA 02174	FOOD/BEVERAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/05/1997	515.00 (IN-KIND)

**SUBTOTALS** of Disbursements This Page (Optional) .....

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



SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	33 / 38
					FOR LINE NUMBER: 17
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NAME OF COMMITTEE (in Full) Giannaros For Congress					
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
DIRECT RESPONSE 392 A. MERROW RD  TOLLAND CT 06084		MEDIA CONSULTANT  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/06/1997	1000.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
NICHOLAS PAINDIRIS 119 BUTLER DR  GLASTONBURY CT 06033		POSTAGE AND SUPPLIES  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/07/1997	52.31 (IN-KIND)
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
KOSTAS TASLIS QUARTET 47 BACON ST  WINCHESTER MA 01890		FUNDRAISER ENTERTAINMENT  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/11/1997	500.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
MANOS FOUSTANELLAS 48-07 23RD AVE  ASTORIA NY 11105		FOOD/BEVERAGE AND HALL RENTAL  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/11/1997	250.00 (IN-KIND)
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
EMANUEL MAVROIDES 44-07 30TH AVE  ASTORIA NY 11103		PRINTING AND TELEPHONE  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/11/1997	815.00 (IN-KIND)
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
MARCOS CATERING HALL 37-19 23RD AVE  ASTORIA NY 11105		HALL RENTAL  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/11/1997	250.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
U.S. POST OFFICE 210 MAIN ST  FARMINGTON CT 06032		POSTAGE  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/12/1997	192.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
U.S. POST OFFICE 210 MAIN ST  FARMINGTON CT 06032		POSTAGE  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/12/1997	320.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
U.S. POST OFFICE 210 MAIN ST  FARMINGTON CT 06032		POSTAGE  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention		11/17/1997	320.00
SUBTOTALS of Disbursements This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (In Full)**  
**Glannaros For Congress**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STAPLES 15 ALBANY TPKE  SIMSBURY CT 06092	CAMPAIGN OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/20/1997	14.84
Prof. Demetrios Glannaros 56 Basswood Road  Farmington CT 06032	(House - CT - 8) TRAVEL & LODGING REIMBURSEMENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/22/1997	562.51
STAPLES 15 ALBANY TPKE  SIMSBURY CT 06092	CAMPAIGN OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/24/1997	105.98
STAPLES 15 ALBANY TPKE  SIMSBURY CT 06092	CAMPAIGN OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/25/1997	24.37
KOSTAS TASLIS QUARTET 47 BACON ST  WINCHESTER MA 01890	FUNDRAISER ENTERTAINMENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/26/1997	800.00
DIMITRIS PANAGOPOULOS 17 WOOLEY LANE  FOXBORO MA 02035	FOOD/BEVERAGE AND HALL RENTAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/29/1997	475.00 (IN-KIND)
NIKOLAS PANAGOPOULOS 17 WODLEY LANE  FOXBORO MA 02035	FOOD/BEVERAGE AND HALL RENTAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	11/29/1997	475.00 (IN-KIND)
STAPLES 15 ALBANY TPKE  SIMSBURY CT 06092	CAMPAIGN OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/02/1997	80.75
M3M TRAVEL SERVICE, INC. 644 SILAS DEANE HIGHWAY  WETHERSFIELD CT 06109	AIRFARE TO WASHINGTON D.C. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/02/1997	305.00

**SUBTOTALS** of Disbursements This Page (Optional) .....

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER

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**NAME OF COMMITTEE (In Full)**  
**Glannaros For Congress**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EVA DIMOPOULOS 80 SOUTHWEST VILLAGE FARMINGTON CT 06032	FOOD/BEVERAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/03/1997	275.00 (IN-KIND)
STAPLES 15 ALBANY TPKE SIMSBURY CT 06092	CAMPAIGN OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/06/1997	31.80
APRESS, INC. 1 LENOLA DR FARMINGTON CT 06032	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/08/1997	352.94
KRISTIN CARTER 60 MAYFLOWER ST WEST HARTFORD CT 06110	POLITICAL CONSULTANT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/11/1997	1750.00
SNET P.O. BOX 1861 NEW HAVEN CT 06508	TELEPHONE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/13/1997	355.24
Prof. Demetrios Glannaros 56 Basswood Road Farmington CT 06032	(House - CT - 6) TRAVEL & LODGING REIMBURSEMENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/13/1997	331.57
DIMITRIOS SOUTOS 8454 W. 29TH ST PARMA OH 44134	FOOD/BEVERAGE AND HALL RENTAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/13/1997	600.00 (IN-KIND)
U.S. POST OFFICE 210 MAIN ST FARMINGTON CT 06032	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/20/1997	128.00
STAPLES 15 ALBANY TPKE SIMSBURY CT 06092	CAMPAIGN OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	12/22/1997	19.75

**SUBTOTALS** of Disbursements This Page (Optional) .....

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

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**NAME OF COMMITTEE (in Full)**  
**Giannaros For Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> YANNIS MELANIDIS 76 HIGHLAND COURT  WEST HAVEN                      CT    06516	<b>Purpose of Disbursement</b>  FOOD/BEVERAGE  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Date (month, day, year)</b> 12/22/1997	<b>Amount of Each Disbursement This Period</b> 300.00 (IN-KIND)
<b>Full Name, Mailing Address, and ZIP Code</b> STAPLES 15 ALBANY TPKE  SIMSBURY                              CT    06092	<b>Purpose of Disbursement</b>  CAMPAIGN OFFICE SUPPLIES  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Date (month, day, year)</b> 12/31/1997	<b>Amount of Each Disbursement This Period</b> 24.37
<b>Full Name, Mailing Address, and ZIP Code</b> Prof. Demetrios Giannaros 58 Basswood Road  Farmington                              CT    06032	<b>Purpose of Disbursement</b> (House - CT - 6) TELEPHONE  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Date (month, day, year)</b> 12/31/1997	<b>Amount of Each Disbursement This Period</b> 120.00 (IN-KIND)
<b>Full Name, Mailing Address, and ZIP Code</b> Prof. Demetrios Giannaros 55 Basswood Road  Farmington                              CT    06032	<b>Purpose of Disbursement</b> (House - CT - 6) TRAVEL  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Convention	<b>Date (month, day, year)</b> 12/31/1997	<b>Amount of Each Disbursement This Period</b> 2047.00 (IN-KIND)

4

<b>SUBTOTALS of Disbursements This Page (Optional)</b> .....	
<b>TOTALS This Period (last page this line number only)</b> .....	<b>19065.04</b>

**SCHEDULE C**

**LOANS**

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(Revised 3/80)

Use separate schedule(s) for each numbered line

FOR LINE NUMBER  
10

**NAME OF COMMITTEE (in Full)**  
**Giannaros For Congress**

Full Name, Mailing Address, and ZIP Code of Loan Source

Prof. Demetrios Giannaros  
58 Basswood Road

Farmington CT 06032

Original Amount of Loan

5000.00

Cumulative Payment to Date

0.00

Balance Outstanding at Close of This Period

5000.00

Election:  Primary  General  Other (specify) Convention

REF-ID: 1329

TERMS: Date Incurred 12/31/1997

Date Due 04/01/1998

Interest Rate = 00.00 %

Secured

List of Endorsers / Guarantors for the Above Loan:

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding  
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding  
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding  
0.00

Full Name, Mailing Address, and ZIP Code of Loan Source

ELIZABETH GIANNAROS  
58 BASSWOOD RD

FARMINGTON CT 06032

Original Amount of Loan

1000.00

Cumulative Payment to Date

0.00

Balance Outstanding at Close of This Period

1000.00

Election:  Primary  General  Other (specify) Convention

REF-ID: 1529

TERMS: Date incurred 00/31/1997

Date Due 04/01/1998

Interest Rate = 00.00 %

Secured

List of Endorsers / Guarantors for the Above Loan:

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding  
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding  
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding  
0.00

**SUBTOTALS** This Period This Page (Optional) .....

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

7000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

**SCHEDULE D**

(Revised 3/80)

**DEBTS AND OBLIGATIONS****Excluding Loans**Use separate schedule(s)  
for each numbered line

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FOR LINE NUMBER

10

NAME OF COMMITTEE (In Full)

Giannaros For Congress

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Full Name, Mailing Address, and Zip Code of Debtor or Creditor DIRECT RESPONSE 392 A MERROW RD  TOLLAND CT 06084	0.00	9000.00	1000.00	8000.00
Nature of Debt (purpose): MEDIA CONSULTANT CONTRACT				

1) **SUBTOTALS** This Period This Page (Optional)2) **TOTALS** This Period (last page this line number only)


8000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD** 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/30/97
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	2/3/97 DATE PREPARED