

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

FEB 1 10 23 AM '97

1. NAME OF COMMITTEE (in full) PETE KING FOR CONGRESS		2. FEC IDENTIFICATION NUMBER C 00272211
ADDRESS (number and street) ☐ Check if different than previously reported. Box 1428		
CITY, STATE and ZIP CODE SEAFORD NY 1783	STATE/DISTRICT NY 3	
3. IS THIS REPORT AN AMENDMENT? ☐ YES ☒ NO		

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- ☐ July 15 Quarterly Report ☐ 30-Day Post-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- ☒ January 31 Year End Report ☐ Termination Report
- ☐ July 31 Mid-Year Report (Non-election Year Only)

This report contains activity for ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
Nov. 26, 1996 through DEC. 31, 1996		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	3785.00	759,787.64
(b) Total Contribution Refunds (from Line 20(d))	700.00	3976.00
(c) Net Contributions (other than loans) [subtract Line 6(b) from 6(a)]	3085.00	455,812.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9761.60	589,369.41
(b) Total Offsets to Operating Expenditures (from Line 14)	488.54	488.54
(c) Net Operating Expenditures [subtract Line 7(b) from 7(a)]	9273.06	588,880.87
8. Cash on Hand at Close of Reporting Period (from Line 27)	41,887.12	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:
Federal Election Commission
889 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 EUGENE TURNER	Date 1/27/97
Signature of Treasurer <i>Eugene Turner</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)

PETE KING FOR CONGRESS

Report Covering the Period:

From: *Nov. 25, 1996*

To: *Dec. 31, 1996*

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Calendar Year-To-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)

(ii) Unitemized

(iii) Total of contributions from individuals

(b) Political Party Committees

(c) Other Political Committees (such as PACs)

(d) The Candidate

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

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the Candidate

(b) All Other Loans

(c) TOTAL LOANS (add 13(a) and (b))

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

15. OTHER RECEIPTS (Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)

II. DISBURSEMENTS

17. OPERATING EXPENDITURES

18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed by the Candidate

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other Than Political Committees

(b) Political Party Committees

(c) Other Political Committees (such as PACs)

(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))

21. OTHER DISBURSEMENTS

22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)

III. CASH SUMMARY

CASH ON HAND AT BEGINNING OF REPORTING PERIOD

\$ *48,075.18*

TOTAL RECEIPTS THIS PERIOD (from Line 16)

\$ *4,273.54*

SUBTOTAL (add Line 23 and Line 24)

\$ *52,348.72*

TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)

\$ *10,461.60*

CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)

\$ *41,887.12*

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 1 OF 1
FOR LINE NUMBER 1121

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

NAME OF COMMITTEE (in Full)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code Catherine Adams 53 Laurel Dr. Massapequa Pk, NY 11762 Receipt For: 1997 ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Hofstra University Occupation SECRETARY Aggregate Year-to-Date \$ 1,000.00	Date (month, day, year) 12-6-96	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$ 0	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$ 0	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$ 0	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$ 0	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$ 0	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$ 0	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,000.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 1 OF 1
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code Transamerica Plc 600 Montgomery St. San Francisco Ca 94111 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ / 000.00	Date (month, day, year) 12.6.96	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,000.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER 14

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NAME OF COMMITTEE (in full)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code NVNEX 185 Franklin St Rm 309 Boston, ma 02110 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer refund Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 12/4/96	Amount of Each Receipt this Period 488.54
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

488.54

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

 PAGE 1 OF 2
FOR LINE NUMBER 17

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

NAME OF COMMITTEE (in full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. POSTMASTER WASHINGTON, D.C.	POSTAGE & P.O. BOX FEE Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12/10/96 11/27/96 12/2/96	960.00 160.00 64.00
SAME AS ABOVE	Purpose of Disbursement Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12/7/96 12/11/96	58.00 960.00
EDITH LAMBO 111 AMPEL AV. N.BELLMORE, N.Y. 11710	POLITICAL CONSULTANT Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/30/96 12/12/96	500.00 25.00
LILCO 175 E. OLD COUNTRY RD. HICKSVILLE, N.Y. 11801	Hq. ELECTRIC BILL Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12/2	19.48
PETER KING 1442 ROTH ROAD SARASOTA, N.Y. 11753	FOR MEALS, TOLLS, PARKING Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/5/96	185.00
CHASE CARD Box 1590Y WILMINGTON, DE 17886	FLOWERS, SHIPPING FOOD, FRAMES PHOTOS FROM BOOKS Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12/6/96	821.17
FEDERAL EXPRESS	SHIPPING COSTS Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/4/96 11/18/96	23.00 memo 13.50 memo
ABCO ART SUNRISE HWY. BELLMORE, N.Y. 11710	PICTURE FRAMES Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/20/96	155.70 memo
QUICKS PHOTO BELLMORE AVE. BELLMORE, N.Y. 11710	PHOTOS + FRAM Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/12	13.02 memo

SUBTOTAL of Disbursements This Page (optional)

3752.65

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 2
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code DUBLINER PUB NEW JERSEY AVE. WASHINGTON, D.C.	Purpose of Disbursement: DINNER for campaign volunteers Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 11/21/96	Amount of Each Disbursement This Period 307.58 memo
B. Full Name, Mailing Address and ZIP Code PETTY CASH	Purpose of Disbursement: XMAS PARTY goods, food, decorations, party favors Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12/9/96	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code FREEPORT BEVERAGE 331 CUNY LOMBARDO AVE. FREEPORT, N.Y. 11520	Purpose of Disbursement: BEVERAGES for XMAS PARTY for volunteers Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12/14/96	Amount of Each Disbursement This Period 250.00
D. Full Name, Mailing Address and ZIP Code PETTY'S FLOWERS 3876 MERRICK ROAD SEAFORD, N.Y. 11783	Purpose of Disbursement: FUNERAL FLOWERS Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12/5/96	Amount of Each Disbursement This Period 50.00
E. Full Name, Mailing Address and ZIP Code A T & T Box 371302 PITTSBURGH, PA. 15250	Purpose of Disbursement: Hq. LONG DISTANCE Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12/5/96	Amount of Each Disbursement This Period 65.73
F. Full Name, Mailing Address and ZIP Code INTERPRO CO. 350 5TH AV. N.Y. N.Y. 10018	Purpose of Disbursement: LOST OF FUNDS RAISER Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12/20/96	Amount of Each Disbursement This Period 3417.59
G. Full Name, Mailing Address and ZIP Code BELL ATLANTIC NYNEX MOBILE Box 15559 WORCESTER, MA. 01615	Purpose of Disbursement: CAMPAIGN CELL PHONE Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12/27/96	Amount of Each Disbursement This Period 567.58
H. Full Name, Mailing Address and ZIP Code CONGRESSIONAL PRINTER 4333 CHARLES CROSSING DRIVE WHITE PLAINS, MA. 20625	Purpose of Disbursement: PRINT. INVITES FOR D.C. RECEPTION Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12/27/96	Amount of Each Disbursement This Period 1034.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

5884.90

TOTAL This Period (last page this line number only)

9637.55

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER 20

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
20 A OXFORD TRUCK LEASING 276 S. SERVICE ROAD MELVILLE, N.Y. 11747	REFUND OF CONTRIB. Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12/5/96	300.00
20 C NATCA PAC 1150 17 ST. NW WASHINGTON, D.C. 20036	REFUND OF CONTRIB. Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12/30/96	400.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

700.00

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.

☐ Hand Delivered

DATE OF RECEIPT

☐ First Class Mail

POSTMARKED

☒ Registered/Certified Mail

POSTMARKED

1-28-97

☐ No Postmark

☐ Postmark Illegible

☐ Received from the House Office of Records
and Registration

DATE OF RECEIPT

☐ Received from the Senate Office of Public
Records

DATE OF RECEIPT

☐ Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

LMH
PREPARER

2-1-97
DATE PREPARED