

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Christopher R. Wight for Congress

ADDRESS (number and street) 122 East 83rd Street
 Check if different than previously reported. (ACC) New York NY 10028

2. **FEC IDENTIFICATION NUMBER** ▼ C00518670 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
NY 12

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 06 / 26 / 2012 in the State of NY
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 06 / 26 / 2012 in the State of NY

5. Covering Period 04 / 01 / 2012 through 06 / 06 / 2012

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 Mr. Christopher Robin Wight
Signature of Treasurer Mr. Christopher Robin Wight [Electronically Filed] Date 06 / 13 / 2012

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Christopher R. Wight for Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	14860.97	31152.67
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	14860.97	31152.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	13641.19	18786.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	13641.19	18786.29
8. Cash on Hand at Close of Reporting Period (from Line 27).....	13866.38	
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).....	2000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Christopher R. Wight for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12270.97	22440.67
(ii) Unitemized	2565.00	5902.00
(iii) TOTAL of contributions from individuals	14835.97	28342.67
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	25.00	2810.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	14860.97	31152.67
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	2000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	14860.97	33152.67

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	13641.19	18786.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	500.00	500.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14141.19	19286.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	13146.60
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14860.97
25. SUBTOTAL (add Line 23 and Line 24).....	28007.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14141.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13866.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

A. Full Name (Last, First, Middle Initial)
Drienne Benner

Mailing Address

City State Zip Code

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

Name of Employer
Appromattox

Occupation
Marketing

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2012

Transaction ID : SA11AI.4489

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Hugh Boston

Mailing Address 114 East 90th Street Apt 3A

City State Zip Code
New York NY 10128

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

Name of Employer
Interpublic

Occupation
Managing Director

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2012

Transaction ID : SA11AI.4396

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
David Brumberg

Mailing Address 330 E 79Th Street

City State Zip Code
New York NY 10075

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

Name of Employer

Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA11AI.4499

Amount of Each Receipt this Period

250.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

A. Full Name (Last, First, Middle Initial)
Henry Buhl

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11AI.4376

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Richard R. Davis

Mailing Address 1185 Park Avenue

City State Zip Code
 New York NY 10128

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 06 / 2012

Transaction ID : SA11AI.4520

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Tana Dye

Mailing Address 485 Park Avenue

City State Zip Code
 New York NY 10022

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.4297

Amount of Each Receipt this Period
 250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. Bruce Gelb		Date of Receipt MM / DD / YYYY 06 / 05 / 2012
Mailing Address		Transaction ID : SA11AI.4493
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2500.00
Name of Employer Bristol Myers Squibb	Occupation Occupational consultant	
Receipt For: 212 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) B. Bruce Gelb		Date of Receipt MM / DD / YYYY 06 / 05 / 2012
Mailing Address		Transaction ID : SA11AI.4506
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2500.00
Name of Employer Bristol Myers Squibb	Occupation Occupational consultant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) C. Timothy J. Healy		Date of Receipt MM / DD / YYYY 06 / 05 / 2012
Mailing Address 1200 Fifth Avenue #8C		Transaction ID : SA11AI.4522
City	State Zip Code	
City	State Zip Code	
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 300.00
Name of Employer self employed	Occupation investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

A. Full Name (Last, First, Middle Initial)
Peter Hein

Mailing Address 101 Central Park WEst, #14E

City State Zip Code
New York NY 10023

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2012

Transaction ID : SA11AI.4301

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Maureen Hurley

Mailing Address 785 Park Avenue

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Seward & Kissel Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2012

Transaction ID : SA11AI.4400

Amount of Each Receipt this Period
 350.00

C. Full Name (Last, First, Middle Initial)
Maureen Hurley

Mailing Address 785 Park Avenue

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Seward & Kissel Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA11AI.4517

Amount of Each Receipt this Period
 100.00

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

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

Mailing Address 1 River Place #3606

City State Zip Code
New York NY 10036

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

Name of Employer Occupation
Carlyle Vice President

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : SA11AI.4382

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Stephen Madsen

Mailing Address 825 Eighth Ave., 41st floor

City State Zip Code
New York NY 10019

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

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 05 / 2012

Transaction ID : SA11AI.4497

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Robert Morgan

Mailing Address 55 East End Ave Apt 6K

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Emmet, Marvin & Marvin LLP Attorney

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 22 / 2012

Transaction ID : SA11AI.4391

Amount of Each Receipt this Period
100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

A. Full Name (Last, First, Middle Initial)
Paul Niehaus

Mailing Address 220 East 54th Street

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
self employed attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2012

Transaction ID : SA11AI.4546

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Michael D. Robbins

Mailing Address 40 East 88th Street #3A

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
retired NA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2012

Transaction ID : SA11AI.4528

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
William Stewart

Mailing Address 100 West 57th Street, Apt 17I

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
Stewart Alexander & Company ship broker

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA11AI.4371

Amount of Each Receipt this Period
200.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 11 OF 35
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

A. Full Name (Last, First, Middle Initial)
Georgiana Viest

Mailing Address 430 East 86th Street #11B

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Metropolitan Republican Club Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA11AI.4526

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Robert Watson

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA11AI.4501

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Wayne Whitmore

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2012

Transaction ID : SA11AI.4491

Amount of Each Receipt this Period
300.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. Sky Wilber		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 28 / 2012
Mailing Address 151 Barton Road		Transaction ID : SA11AI.4378
City White Plains	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Foundation Asset Managemet	Occupation Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Ms Jill Yankaskas		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 1965 Broadway #22K		Transaction ID : SA11AI.4361
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 720.97 In-kind - catering & beverages for fundraiser
Name of Employer Goldman Sachs	Occupation Director	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1115.67	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	970.97
TOTAL This Period (last page this line number only).....	12270.97

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 35
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Christopher Robin Wight

Mailing Address 120 East 90th Street
Apt. 4J

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
JP Morgan Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4810.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2012

Transaction ID : SA11D.4399

Amount of Each Receipt this Period
25.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

25.00

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. ATD A/V rentals		Date of Disbursement MM / DD / YYYY 04 / 16 / 2012
Mailing Address 160 E. 56th St.		Amount of Each Disbursement this Period 609.70 Transaction ID : SB17.4425
City New York State NY Zip Code 10022	Purpose of Disbursement sound equipment	
Candidate Name Christopher R. Wight for Congress		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B. Patricia Barker		Date of Disbursement MM / DD / YYYY 04 / 18 / 2012
Mailing Address		Amount of Each Disbursement this Period 277.50 Transaction ID : SB17.4340
City State Zip Code	Purpose of Disbursement independent contractor - petitioning	
Candidate Name Christopher R. Wight for Congress		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) c. D'Agostino		Date of Disbursement MM / DD / YYYY 05 / 24 / 2012
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period 65.30 Transaction ID : SB17.4478
City New York State NY Zip Code 10028	Purpose of Disbursement refreshments for campaign event	
Candidate Name Christopher R. Wight for Congress		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

SUBTOTAL of Disbursements This Page (optional).....	952.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. D'Agostino		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period 21.82 Transaction ID : SB17.4479
City New York	State NY	
Zip Code 10028	Purpose of Disbursement refreshments for campaign event	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) B. D'Agostino		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period 11.69 Transaction ID : SB17.4480
City New York	State NY	
Zip Code 10028	Purpose of Disbursement refreshments for campaign event	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) c. Elite Limousine Plus Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 32-72 Gale Avenue		Amount of Each Disbursement this Period 198.02 Transaction ID : SB17.4448
City Long Island City	State NY	
Zip Code 11101	Purpose of Disbursement local transportation	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

SUBTOTAL of Disbursements This Page (optional).....	231.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 1122 Lexington Avenue		Amount of Each Disbursement this Period 91.85 Transaction ID : SB17.4407
City New York	State NY	
Zip Code 10021	Purpose of Disbursement copying	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) B. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 1122 Lexington Avenue		Amount of Each Disbursement this Period 27.42 Transaction ID : SB17.4418
City New York	State NY	
Zip Code 10021	Purpose of Disbursement copying	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) c. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 1122 Lexington Avenue		Amount of Each Disbursement this Period 27.42 Transaction ID : SB17.4422
City New York	State NY	
Zip Code 10021	Purpose of Disbursement copying	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

SUBTOTAL of Disbursements This Page (optional).....	146.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 35			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement
Mailing Address 1122 Lexington Avenue		M M / D D / Y Y Y Y 04 / 16 / 2012
City New York	State NY	Zip Code 10021
Purpose of Disbursement copying		Amount of Each Disbursement this Period 68.44
Candidate Name Christopher R. Wight for Congress	Category/ Type	Transaction ID : SB17.4432
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B. FedEx Office		Date of Disbursement
Mailing Address 1122 Lexington Avenue		M M / D D / Y Y Y Y 04 / 16 / 2012
City New York	State NY	Zip Code 10021
Purpose of Disbursement copying		Amount of Each Disbursement this Period 90.05
Candidate Name Christopher R. Wight for Congress	Category/ Type	Transaction ID : SB17.4433
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) c. FedEx Office		Date of Disbursement
Mailing Address 1122 Lexington Avenue		M M / D D / Y Y Y Y 04 / 20 / 2012
City New York	State NY	Zip Code 10021
Purpose of Disbursement copying		Amount of Each Disbursement this Period 81.64
Candidate Name Christopher R. Wight for Congress	Category/ Type	Transaction ID : SB17.4443
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

SUBTOTAL of Disbursements This Page (optional).....	240.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement MM / DD / YYYY 04 / 20 / 2012
Mailing Address 1122 Lexington Avenue		Amount of Each Disbursement this Period 81.64 Transaction ID : SB17.4444
City New York	State NY	
Zip Code 10021	Purpose of Disbursement copying	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) B. Debra Lable		Date of Disbursement MM / DD / YYYY 04 / 19 / 2012
Mailing Address		Amount of Each Disbursement this Period 230.16 Transaction ID : SB17.4324
City	State	
Zip Code	Purpose of Disbursement catering for fundraising event	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) c. Metropolitan Republican Club		Date of Disbursement MM / DD / YYYY 05 / 11 / 2012
Mailing Address 122 East 83rd Street		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4487
City New York	State NY	
Zip Code 10028	Purpose of Disbursement donation	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

SUBTOTAL of Disbursements This Page (optional).....	561.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. Metropolitan Republican Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 122 East 83rd Street		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4485
City New York	State NY	
Zip Code 10028	Purpose of Disbursement rent for campaign office	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) B. Issac Mulamba		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00 Transaction ID : SB17.4334
City	State	
Zip Code	Purpose of Disbursement independent contractor - petitioning	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address various		Amount of Each Disbursement this Period 13.00 Transaction ID : SB17.4428
City Long Island City	State NY	
Zip Code	Purpose of Disbursement local transportation	Category/ Type
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

SUBTOTAL of Disbursements This Page (optional).....	873.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 35			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address various		Amount of Each Disbursement this Period 9.00 Transaction ID : SB17.4429
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address various		Amount of Each Disbursement this Period 12.40 Transaction ID : SB17.4434
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address various		Amount of Each Disbursement this Period 10.50 Transaction ID : SB17.4435
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

SUBTOTAL of Disbursements This Page (optional).....	31.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address various		Amount of Each Disbursement this Period 6.80 Transaction ID : SB17.4436
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address various		Amount of Each Disbursement this Period 6.60 Transaction ID : SB17.4440
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address various		Amount of Each Disbursement this Period 7.00 Transaction ID : SB17.4446
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

SUBTOTAL of Disbursements This Page (optional).....	20.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address various		Amount of Each Disbursement this Period 7.30 Transaction ID : SB17.4447
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 12	

Full Name (Last, First, Middle Initial) B. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address various		Amount of Each Disbursement this Period 16.60 Transaction ID : SB17.4449
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 12	

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address various		Amount of Each Disbursement this Period 9.60 Transaction ID : SB17.4452
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	33.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address various		Amount of Each Disbursement this Period 8.50
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	Transaction ID : SB17.4453
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2012
Mailing Address various		Amount of Each Disbursement this Period 9.70
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	Transaction ID : SB17.4454
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address various		Amount of Each Disbursement this Period 13.30
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	Transaction ID : SB17.4455
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

SUBTOTAL of Disbursements This Page (optional).....	31.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 35			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address various		Amount of Each Disbursement this Period 8.50
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	Transaction ID : SB17.4456
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address various		Amount of Each Disbursement this Period 11.70
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	Transaction ID : SB17.4460
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address various		Amount of Each Disbursement this Period 9.70
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	Transaction ID : SB17.4461
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

SUBTOTAL of Disbursements This Page (optional)	29.70
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address various		Amount of Each Disbursement this Period 5.70 Transaction ID : SB17.4463
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address various		Amount of Each Disbursement this Period 10.50 Transaction ID : SB17.4465
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012
Mailing Address various		Amount of Each Disbursement this Period 11.00 Transaction ID : SB17.4466
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

SUBTOTAL of Disbursements This Page (optional).....	27.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 35		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address various		Amount of Each Disbursement this Period 5.30 Transaction ID : SB17.4468
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 12	

Full Name (Last, First, Middle Initial) B. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address various		Amount of Each Disbursement this Period 8.10 Transaction ID : SB17.4472
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 12	

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address various		Amount of Each Disbursement this Period 5.40 Transaction ID : SB17.4473
City Long Island City	State NY	
Purpose of Disbursement local transportation	Zip Code	Category/ Type
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 12	

SUBTOTAL of Disbursements This Page (optional)	18.80
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address various		Amount of Each Disbursement this Period 11.40 Transaction ID : SB17.4474
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) B. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address various		Amount of Each Disbursement this Period 12.60 Transaction ID : SB17.4475
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) c. New York City Taxi		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address various		Amount of Each Disbursement this Period 9.70 Transaction ID : SB17.4476
City Long Island City	State NY	
Purpose of Disbursement local transportation	Category/ Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

SUBTOTAL of Disbursements This Page (optional).....	33.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial)
A. New York City Taxi

Mailing Address various

City Long Island City State NY Zip Code

Purpose of Disbursement local transportation

Candidate Name **Christopher R. Wight for Congress** Category/Type

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: NY District: 12

Date of Disbursement: 06 / 01 / 2012

Amount of Each Disbursement this Period: 18.00

Transaction ID : SB17.4508

Full Name (Last, First, Middle Initial)
B. New York Republican County Committee

Mailing Address 122 East 83rd Street

City New York State NY Zip Code 10028

Purpose of Disbursement donation

Candidate Name **Christopher R. Wight for Congress** Category/Type

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: NY District: 12

Date of Disbursement: 04 / 12 / 2012

Amount of Each Disbursement this Period: 150.00

Transaction ID : SB17.4326

Full Name (Last, First, Middle Initial)
c. New York Republican County Committee

Mailing Address 122 East 83rd Street

City New York State NY Zip Code 10028

Purpose of Disbursement donation

Candidate Name **Christopher R. Wight for Congress** Category/Type

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: NY District: 12

Date of Disbursement: 04 / 13 / 2012

Amount of Each Disbursement this Period: 10.00

Transaction ID : SB17.4329

SUBTOTAL of Disbursements This Page (optional) 178.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. Paypal		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4470
City	State Zip Code	
Purpose of Disbursement pay flow pro online credit card processing	Category/Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) B. Paypal		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 62.83 Transaction ID : SB17.4366
City	State Zip Code	
Purpose of Disbursement paypal fees - May	Category/Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) c. Paypal		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.50 Transaction ID : SB17.4507
City	State Zip Code	
Purpose of Disbursement paypal fees June 1-6	Category/Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

SUBTOTAL of Disbursements This Page (optional).....	343.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 35			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. William Reeves		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 460.00 Transaction ID : SB17.4336
City	State Zip Code	
Purpose of Disbursement independent contractor - petitioning	Category/Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) B. Thomas Smith		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 430.00 Transaction ID : SB17.4332
City	State Zip Code	
Purpose of Disbursement independent contractor - petitioning	Category/Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 1280 Lexington Avenue		Amount of Each Disbursement this Period 137.36 Transaction ID : SB17.4413
City	State Zip Code New York NY 10128	
Purpose of Disbursement office supplies	Category/Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

SUBTOTAL of Disbursements This Page (optional)	1027.36
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 35		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. Shashank Tripathi		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4323
City	State Zip Code	
Purpose of Disbursement consulting fee	Category/ Type 001	
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B. Shashank Tripathi		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012
Mailing Address		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4359
City	State Zip Code	
Purpose of Disbursement consulting fee	Category/ Type	
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) c. Shashank Tripathi		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address		Amount of Each Disbursement this Period 579.08 Transaction ID : SB17.4355
City	State Zip Code	
Purpose of Disbursement office supplies	Category/ Type	
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

SUBTOTAL of Disbursements This Page (optional)	4579.08
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 40 West Street		Amount of Each Disbursement this Period 308.75 Transaction ID : SB17.4439
City New York	State NY	
Purpose of Disbursement telecom services for campaign office	Category/ Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 40 West Street		Amount of Each Disbursement this Period 108.86 Transaction ID : SB17.4457
City New York	State NY	
Purpose of Disbursement telecom services	Category/ Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 40 West Street		Amount of Each Disbursement this Period 1394.46 Transaction ID : SB17.4367
City New York	State NY	
Purpose of Disbursement telecom costs for campaign office	Category/ Type	
Candidate Name Christopher R. Wight for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12	

SUBTOTAL of Disbursements This Page (optional).....	1812.07
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. Ms Jill Yankaskas		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 1965 Broadway #22K		Amount of Each Disbursement this Period 720.97 Transaction ID : SB17.4362
City New York State NY Zip Code 10023	Purpose of Disbursement In-kind - catering & beverages for fundraiser	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	720.97
TOTAL This Period (last page this line number only).....	11893.36

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 35	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Christopher R. Wight for Congress

Full Name (Last, First, Middle Initial) A. Republican State Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 500.00 Transaction ID : SB18.4483
City	State Zip Code	
Purpose of Disbursement donation	Category/ Type	
Candidate Name Christopher R. Wight for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 12		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Christopher R. Wight for Congress** Transaction ID : **SC/10.4212**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Christopher Robin Wight	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 120 East 90th Street Apt. 4J	

City	State	ZIP Code
New York	NY	10128

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 / 10 / 2012	open	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	2000.00
TOTALS This Period (last page in this line only).....	2000.00

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