

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION

OCT 23 2 35 PM '98

USE REC NULING LABEL

TYPE IN PRINT

1. NAME OF COMMITTEE (s) (a)		2. FEED IDENTIFICATION NUMBER	
Pete King for Congress Committee		C00272211	
ADDRESS (number and street) ☐ Check if different than previously reported.		3. IS THIS REPORT AN AMENDMENT?	
P.O. Box 1428		☐ YES ☒ NO	
CITY, STATE and ZIP CODE	STATE/DISTRICT		
Seaford, NY 11783	NY/3		

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid-Year Report (Non-election Year Only)
☒ 12-Day Pre-Election Report for the General
 election on 11/3/98 in the State of New York
☐ 30-Day Post-Election Report for the _____
 election on _____ in the State of _____
☐ Termination Report

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
10/1/98 through 10/14/98		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	24,480.00	270,884.00
(b) Total Contribution Refunds (from Line 20(d))	0	3,600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	24,480.00	267,284.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4,752.94	96,337.75
(b) Total Offsets to Operating Expenditures (from Line 14)	232.00	232.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	4,520.94	96,105.75
8. Cash on Hand at Close of Reporting Period (from Line 27)	330,610.49	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information
contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9630
Local 202-215-3420

Type or Print Name of Treasurer	Date
Eugene A. Turner	OCT 19 1998
Signature of Treasurer	
Eugene A. Turner	

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) PETER KING FOR CONGRESS		Report Covering the Period: From 10/1/94 To 10/14/94	
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 (see Schedule A)		3,225.00	
(ii) Unitemized		3,005.00	
(iii) Total of contributions from individuals		6,230.00	119,482.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		19,200.00	152,462.00
(d) The Candidate		0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d))		24,435.00	270,884.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	0.00
13. LOANS:			
(a) Made or Guaranteed by the Candidate		0.00	0.00
(b) All Other Loans		0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))		0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		232.00	232.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		24,712.00	271,116.00
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		4,752.94	96,337.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0.00	0.00
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		0.00	0.00
(b) Of All Other Loans		0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		0.00	23,000.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	1,000.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		0.00	24,000.00
21. OTHER DISBURSEMENTS		5,875.00	20,499.91
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		10,627.94	120,437.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 316,526.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 24,712.00
25. SUBTOTAL (add Line 23 and Line 24)	\$ 341,238.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 10,627.94
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 330,610.49

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1	OF 2
	FOR LINE NUMBER 11(a)(i)	

Contributions from Individuals

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 C00272211

A. Full Name, Mailing Address and ZIP Code Patrick Donaghy 15 East 26Th Street New York NY 10010 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Struture Tone, Inc. Occupation Chairman-Ceo Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and ZIP Code Ronald Edelson 11 Upland Road Great Neck NY 11020 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Zimmerman/Edelson, Inc. Occupation President Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code Kenneth Feld 9609 Balter Court Rockville MD 20854 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Feld Entertainment, Inc Occupation Chairman & Ceo Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Jerry Keogh 24 Fuller Place Brooklyn NY 11215 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer McGoldrick & Keogh Occupation Attorney Aggregate Year-to-Date > \$300.00	Date (month, day, year) 10/05/98	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code Tom Kinirons 460 Rose Street Oceanside NY 11572 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Nassau County Police Department Occupation Police Officer Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/09/98	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code Donald Manfredonia 1 Pheasant Circle Lloyd Harbor NY 11743 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer 1st National Bank of Long Island Occupation Banker Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code Joseph Perri 28 Margaret Drive Plainview NY 11803 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer 1st National Bank of L. Occupation Banker Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/07/98	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER
11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code Mary Rattigan Ms. 39 W 4Th St Hazleton PA 18201 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Retired Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/05/98	Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and ZIP Code Michael Sinnott 34 Lilac Lane Levittown NY 11756 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/09/98	Amount of Each Receipt this Period \$250.00
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)

\$275.00

TOTAL This Period (last page this line number only)

\$3,275.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER
11(c)

Contributions from Other Committees

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 C00272211

A. Full Name, Mailing Address and ZIP Code AFSCME PAC 1625 L Street Suite NW Washington DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,500.00	Date (month, day, year) 10/05/98	Amount of Each Receipt this Period \$1500.00
B. Full Name, Mailing Address and ZIP Code Air Line Pilots Association PAC 1625 Massachusetts Ave Suite NW Washington DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,500.00	Date (month, day, year) 10/05/98	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and ZIP Code American Council of Life Insurance PAC 1001 Pennsylvania Avenue, Washington DC 20004-2599 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and ZIP Code American Society of Travel Agents, Inc. PAC 1101 King Street Suite 200 Alexandria VA 22314 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$200.00	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and ZIP Code Bell Atlantic Federal PAC 1717 Arch Street 47S Philadelphia PA 19103 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Building Our Bases PAC Post Office Box 6683 Arlington VA 22206 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 10/05/98	Amount of Each Receipt this Period \$5000.00
G. Full Name, Mailing Address and ZIP Code Fireman's Fund Insurance Co. PAC 777 San Marin Dr Novato CA 94945 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/07/98	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$9,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule(s)
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Detailed Summary Page

 PAGE 2 OF 3
FOR LINE NUMBER
11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code House PAC 1730 K Street, NW Suite 1106 Washington DC 20006 Receipt For: ☐ Primary ☒ General Other (specify):	Name of Employer Date (month, day, year) 10/05/98 Occupation PAC Aggregate Year-to-Date = \$500.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code International Asso. Of Fire Fighters 1750 New York Ave Washington DC 20006 Receipt For: ☐ Primary ☒ General Other (specify):	Name of Employer Date (month, day, year) 10/14/98 Occupation PAC Aggregate Year-to-Date = \$1,000.00	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and ZIP Code Long Island Regional Council of Carpenters 91 Carolyn Blvd. Farmingdale NY 11735 Receipt For: ☐ Primary ☒ General Other (specify):	Name of Employer Date (month, day, year) 10/01/98 Occupation PAC Aggregate Year-to-Date = \$1,500.00	Amount of Each Receipt this Period \$1500.00
D. Full Name, Mailing Address and ZIP Code Long Island Savings Bank PAC 201 Old Country Rd Melville NY 11747 Receipt For: ☐ Primary ☒ General Other (specify):	Name of Employer Date (month, day, year) 10/05/98 Occupation PAC Aggregate Year-to-Date = \$2,000.00	Amount of Each Receipt this Period \$2000.00
E. Full Name, Mailing Address and ZIP Code MetLife PAC 1620 L Street Suite 800 Washington DC 20036 Receipt For: ☐ Primary ☒ General Other (specify):	Name of Employer Date (month, day, year) 10/04/98 Occupation PAC Aggregate Year-to-Date = \$2,000.00	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and ZIP Code New York State Right to Life PAC 41 State St Albany NY 12207 Receipt For: ☐ Primary ☒ General Other (specify):	Name of Employer Date (month, day, year) 10/01/98 Occupation PAC Aggregate Year-to-Date = \$500.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code Responsible Citizens Political League 3 Research Place Rockville MD 20850 Receipt For: ☐ Primary ☒ General Other (specify):	Name of Employer Date (month, day, year) 10/14/98 Occupation PAC Aggregate Year-to-Date = \$1,500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$7,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3
FOR LINE NUMBER 11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code The Hartford Advocates Fund Hartford Plaza Hartford CT 06115		Name of Employer Occupation PAC	Date (month, day, year) 10/05/98	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > \$500.00		
B. Full Name, Mailing Address and ZIP Code United Food & Commercial Workers Union 1500 Pac 1775 K St Washington DC 20006		Name of Employer Occupation PAC	Date (month, day, year) 10/05/98	Amount of Each Receipt this Period \$1000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > \$1,600.00		
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
		Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
		Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
		Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
		Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
		Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$1,500.00

TOTAL This Period (last page this line number only)

\$18,200.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER
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Offsets to Operating Expenditures

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NAME OF COMMITTEE (in full):

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code Long Island Power Authority Sunrise Highway Bellmore, NY 11710 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$232.00	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$232.00
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):

\$232.00

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

\$232.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

 PAGE 1 OF 2
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Massapequa Park NY 11762	postage Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/05/98	\$320.00
B. Full Name, Mailing Address and ZIP Code Massapequa Park NY 11762	Purpose of Disbursement bulk mailing Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/09/98	\$155.86
C. Full Name, Mailing Address and ZIP Code Quick's Photo 1877 Bellmore Ave Bellmore NY 11710	Purpose of Disbursement photo developing Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/14/98	\$169.26
D. Full Name, Mailing Address and ZIP Code Irish Echo 309 5Th Ave New York City NY	Purpose of Disbursement ad Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/12/98	\$604.80
E. Full Name, Mailing Address and ZIP Code Bell Atlantic BOX 1100 Albany NY 12250-0001	Purpose of Disbursement phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/01/98	\$49.60
F. Full Name, Mailing Address and ZIP Code Bell Atlantic BOX 1100 Albany NY 12250-0001	Purpose of Disbursement phone calls Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/01/98 10/12/98	\$24.58 \$254.32
G. Full Name, Mailing Address and ZIP Code Bell Atlantic BOX 1100 Albany NY 12250-0001	Purpose of Disbursement pphone inetallation Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/14/98	\$539.34
H. Full Name, Mailing Address and ZIP Code Staples 5500 Sunrise Hwy Massapequa NY 11758	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/08/98	\$159.17
I. Full Name, Mailing Address and ZIP Code Irish Voice BOX 686 Sicklerville NJ 08081-990	Purpose of Disbursement ad Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/12/98	\$700.00

SUBTOTAL of Disbursements This Page (optional)

\$2,976.93

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 2 OF 2
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code Friends Of Sinn Fein 15 Park Row New York City NY	Purpose of Disbursement ticket purchase Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	Date (month, day, year) 10/09/98	Amount of Each Disbursement This Period \$500.00
B. Full Name, Mailing Address and ZIP Code Reynolds, John 141 Randolph Ave Dumont NJ 07628	Purpose of Disbursement band Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	Date (month, day, year) 10/01/98	Amount of Each Disbursement This Period \$600.00
C. Full Name, Mailing Address and ZIP Code Downes, Sean 15 Park Row New York NY 10038	Purpose of Disbursement invitations Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	Date (month, day, year) 10/12/98	Amount of Each Disbursement This Period \$273.32
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)

\$1,373.32

TOTAL This Period (last page this line number only)

\$4,350.25

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

 PAGE 1 OF 1
FOR LINE NUMBER 21

Other Disbursements

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 C00272311

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nassau Co. Repub. Committ 164 Post Ave Westbury NY 11590	purchases of discs Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/02/98	\$500.00
B. Full Name, Mailing Address and ZIP Code Town Of Hemp. Repub. Cmte 164 Post Ave Westbury NY 11590	ticket purchase Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/12/98	\$125.00
C. Full Name, Mailing Address and ZIP Code Nat'l. Repub. Congr. Cmte 320 SE 1st St Washington DC 20003	transfer per 11 ofr Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/06/98	\$5000.00
D. Full Name, Mailing Address and ZIP Code Victory 98 164 Post Ave Westbury NY 11590	ticket purchase Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	10/12/98	\$250.00
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)

\$5,875.00

TOTAL This Period (last page this line number only)

\$5,875.00

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 10/19/98
☐ 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
☐ Electronic Filing	
 PREPARER	10/23/98 DATE PREPARED