

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Friends of Marilyn O'Grady

ADDRESS (number and street)

PMB 162

Check if different than previously reported. (ACC)

734 Franklin Avenue

Garden City

NY

11530

2. **FEC IDENTIFICATION NUMBER**

C00375071

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT **NEW (N)** OR **X AMENDED (A)**

NY

4

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

In the State of

(c) 30-Day **POST**-Election Report for the:

X General (30G)

Runoff (30R)

Special (30S)

Election on

11

05

2002

in the State of

NY

5. Covering Period 10 17 2002 through 11 25 2002

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 Thomas Keller

Signature of Treasurer Electronically Filed by Thomas Keller Date 02 13 2004

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Marilyn O'Grady

Report Covering the Period: From: ^M ^M ^Y ^Y ^V ^V To: ^Y ^M ^Y ^Y ^V ^V
1 0 1 7 2 0 0 2 1 1 2 5 2 0 0 2

	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(a)).....	65208.00	229577.72
(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)).....	65208.00	229577.72
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	126978.60	465645.14
(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)).....	126978.60	465645.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3627.69	
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).....	255000.00	

For further information contact:

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

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

**POST-ELECTION DETAILED
SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

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Page 5

. If the candidate participated in the general election, use this form for the 30-day Post-General report.

. If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Friends of Marilyn O'Grady

Report Covering the Period: From:

M	M	D	D	Y	Y	Y	Y
1	0	1	7	2	0	0	2

 To:

M	M	D	D	Y	Y	Y	Y
1	1	2	5	2	0	0	2

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of	COLUMN C Total for																																																
11. CONTRIBUTIONS (other than loans) FROM:	<table border="0"><tr><td>M</td><td>M</td><td>J</td><td>J</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>0</td><td>5</td><td>2</td><td>0</td><td>0</td><td>2</td></tr></table> <p align="center">(date of general election)</p>	M	M	J	J	Y	Y	Y	Y	1	1	0	5	2	0	0	2	<table border="0"><tr><td>M</td><td>M</td><td>D</td><td>D</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>0</td><td>6</td><td>2</td><td>0</td><td>0</td><td>2</td></tr></table> <p align="center">(date after general election)</p> <p align="center">through</p> <table border="0"><tr><td>M</td><td>M</td><td>D</td><td>D</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>2</td><td>5</td><td>2</td><td>0</td><td>0</td><td>2</td></tr></table> <p align="center">(last day of reporting period)</p>	M	M	D	D	Y	Y	Y	Y	1	1	0	6	2	0	0	2	M	M	D	D	Y	Y	Y	Y	1	1	2	5	2	0	0	2
M	M	J	J	Y	Y	Y	Y																																											
1	1	0	5	2	0	0	2																																											
M	M	D	D	Y	Y	Y	Y																																											
1	1	0	6	2	0	0	2																																											
M	M	D	D	Y	Y	Y	Y																																											
1	1	2	5	2	0	0	2																																											
(a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A)																																																		
38040.00																																																		
(ii) Unitemized																																																		
16628.00																																																		
(iii) Total of contributions from Individuals																																																		
54668.00	218537.72	125.00																																																
(b) Political Party Committees																																																		
1000.00	1000.00	0.00																																																
(c) Other Political Committees																																																		
9540.00	9540.00	0.00																																																

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

FEC Form 3 (Revised 02/2003)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)	
(d) The Candidate	0.00	500.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(III), (b), (c) and (d))	65208.00	229577.72	125.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	0.00
13. LOANS:			
(a) Made or Guaranteed by the Candidate	70000.00	255000.00	0.00
(b) All Other Loans	0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	70000.00	255000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)	0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)	0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	135208.00	484577.72	125.00

**POST ELECTION DETAILED
SUMMARY PAGE**

Report of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Page 7

Write or Type Committee Name

Friends of Marilyn O'Grady

Report the covering period

From:

10th 17th | (2002)

To:

11th 25th | (2002)

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
126978.60	465645.14	15429.89
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED
SUMMARY PAGE**

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Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
(c) Other political committees (such as PACs)	0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))	0.00	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)	126978.60	465645.14	15429.89

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

65208.00	229577.72	125.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

126978.60	465645.14	15429.89
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	-4601.71
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 18).....	135208.00
25. SUBTOTAL (add Line 23 and Line 24)	130606.29
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	126978.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	3627.69

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 54

(check only one)

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

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)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. David Abraham		Date of Receipt M / D / Y 10 / 26 / 2002
Mailing Address 31 Wyatt Road		Transaction ID: SA11A1.6664
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-employed	Occupation Physician	2225 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Kenneth Akesson		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address PO Box 8020		Transaction ID: SA11A1.6456
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation business executive	2004 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Nancy Akesson		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address PO BOX 8020		Transaction ID: SA11A1.6457
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer information requested	Occupation information requested	2004 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	2200.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Paul Anastasio		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 350 E. 79th Street		Transaction ID: SA11A1.6459
City New York	State NY	Zip Code 10012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation financial advisor	2075
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. James Bennett		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 34 Hilton Ave		Transaction ID: SA11A1.6460
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer New York State	Occupation attorney	2008
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 800.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Margaret Anne Bergassi		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address 7 Columbus Circle		Transaction ID: SA11A1.6481
City Eastchester	State NY	Zip Code 10707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation student	2083
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. William Blum		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 81 Brompton Road		Transaction ID: SA11A1.6462
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation stock trader Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. David Bonagura		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address Andover Road		Transaction ID: SA11A1.6463
City Rockville Centre	State NY	Zip Code 11570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 500.00	2008 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Harry Buckel		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 211 Woodrime Avenue		Transaction ID: SA11A1.6464
City Northport	State NY	Zip Code 11768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 300.00	2010 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. John Cameron		Date of Receipt M / D / Y 10 / 26 / 2002
Mailing Address 59 Royal Court		Transaction ID: SA11A1.6465
City Rockville Centre	State NY	Zip Code 11570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation engineer	2013 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Patricia Castel		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address 80 Pine Street		Transaction ID: SA11A1.6466
City New York	State NY	Zip Code 10005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation attorney	2014 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Frank Collins		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 293 Trumbell Rd		Transaction ID: SA11A1.6468
City Manhasset	State NY	Zip Code 11030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer information requested	Occupation information requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Paul Conte		Date of Receipt M / D / Y 10 / 26 / 2002
Mailing Address		Transaction ID: SA11A1.6567
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	3032
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Francis Cosgrove		Date of Receipt M / D / Y 10 / 24 / 2002
Mailing Address 235 Burtis Ave.		Transaction ID: SA11A1.6629
City	State	Zip Code
Rockville Centre	NY	11570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer NA	Occupation NA	3106
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 210.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Kenneth Coyle		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 377 Oak St.		Transaction ID: SA11A1.6489
City	State	Zip Code
Garden City	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self-employed	Occupation Insurance	2018
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	460.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Devon Cross		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 870 Fifth Avenue		Transaction ID: SA11A1.6470
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	2019
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. William Dal		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 2526 S. Arlington Mill Drive		Transaction ID: SA11A1.6471
City Arlington	State VA	Zip Code 22206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer U.S. Military	Occupation Colonel	2020
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Nelson DeMile		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 61 Hilton Ave		Transaction ID: SA11A1.6852
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer self	Occupation author	2022
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1750.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	1700.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Thomas Eschmann		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address		Transaction ID: SA11A1.6563
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	3028
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Elyass Eshaghian		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address info requested		Transaction ID: SA11A1.6473
City	State	Zip Code
New York	NY	10012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	2023
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Michael Ferraro		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 1 North End Ave		Transaction ID: SA11A1.6474
City	State	Zip Code
New York	NY	10282
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation trader	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Edward Finnerman		Date of Receipt M / D / Y 10 / 24 / 2002
Mailing Address 86 8th Street		Transaction ID: SA11A1.6475
City	State	Zip Code
Garden City	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer self employed	Occupation	2026
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
	300.00	

Full Name (Last, First, Middle Initial) B. Malcolm Forbes		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 80 Fifth Avenue		Transaction ID: SA11A1.6477
City	State	Zip Code
New York	NY	10012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Forbes, Inc	Occupation business executive	2027
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
	1000.00	

Full Name (Last, First, Middle Initial) C. Gabina Forbes		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 28 West 23rd Street 11th Floor		Transaction ID: SA11A1.6476
City	State	Zip Code
New York	NY	10010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self	Occupation self	2026
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
	1000.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 54

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. James Gibbons		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 99 Seventh Street		Transaction ID: SA11A1.6481
City	State	Zip Code
Garden City	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer	Occupation retired	2031
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 650.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Arthur Gilin		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 101 Kenwood		Transaction ID: SA11A1.6482
City	State	Zip Code
Garden City	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer information requested	Occupation information requested	2032
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Charles Gilman		Date of Receipt M / D / Y 10 / 17 / 2002
Mailing Address 8 Park Drive		Transaction ID: SA11A1.6483
City	State	Zip Code
Plandome	NY	11030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	2033
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	1350.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 54

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. James Gilroy		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 87 Wall Street		Transaction ID: SA11A1.6484
City New York	State NY	Zip Code 10005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation attorney	2034
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Robert Grusky		Date of Receipt M / D / Y 10 / 25 / 2002
Mailing Address 40 Haviland Road		Transaction ID: SA11A1.6485
City Harrison	State NY	Zip Code 10528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hope Capital Partners LP	Occupation investor	2035
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Margaret Hannan		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 44 Roxbury Road		Transaction ID: SA11A1.6486
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation housewife	2036
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Blanche Joesten		Date of Receipt M / D / Y 10 / 26 / 2002
Mailing Address		Transaction ID: SA11A1.6647
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	3137
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
		400.00

Full Name (Last, First, Middle Initial) B. Thomas Kaveler		Date of Receipt M / D / Y 10 / 17 / 2002
Mailing Address information requested		Transaction ID: SA11A1.6488
City	State	Zip Code
info requested	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation	2037
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
		500.00

Full Name (Last, First, Middle Initial) C. Joseph Kearney		Date of Receipt M / D / Y 10 / 23 / 2002
Mailing Address 156 Rockaway Ave		Transaction ID: SA11A1.6562
City	State	Zip Code
Garden City	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer Attorney	Occupation Nixon, Peabody	3017
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
		370.00

SUBTOTAL of Receipts This Page (optional)	▶	720.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Diane Kelly		Date of Receipt M / D / Y 10 / 19 / 2002
Mailing Address 30 Cathedral Avenue		Transaction ID: SA11A1.6489
City	State	Zip Code
Garden City	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self employed	Occupation	2038
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
	250.00	

Full Name (Last, First, Middle Initial) B. Patrick Kelly		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 30 Cathedral Avenue		Transaction ID: SA11A1.6490
City	State	Zip Code
Garden City	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation securities	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	
	250.00	

Full Name (Last, First, Middle Initial) C. Eileen Kemmer		Date of Receipt M / D / Y 10 / 25 / 2002
Mailing Address 189 Canterbury Road		Transaction ID: SA11A1.6491
City	State	Zip Code
Williston Park	NY	11568
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	2038
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
	500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Edward Kowalski		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 167 Tullamore Road		Transaction ID: SA11A1.6492
City	State	Zip Code
Garden City	NY	11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation physician	2040
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
		500.00

Full Name (Last, First, Middle Initial) B. Michael Lapenna		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address 19 Heyward Lane		Transaction ID: SA11A1.6493
City	State	Zip Code
Rockville Centre	NY	11570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer self employed	Occupation	2041
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
		800.00

Full Name (Last, First, Middle Initial) C. Ronald Lauder		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 787 5 Ave Ste 4200		Transaction ID: SA11A1.6494
City	State	Zip Code
New York	NY	10153
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer consultant	Occupation self	2042
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
		1000.00

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

SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Deborah Long		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 28 Cathedral Avenue		Transaction ID: SA11A1.6495
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation housewife	2044 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Morris Mark		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 825 Park Avenue		Transaction ID: SA11A1.6496
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Mark Asset Management	Occupation financial manager	2047 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. George Martin		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 1735 Market St		Transaction ID: SA11A1.6497
City Philadelphia	State PA	Zip Code 19103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CEO	Occupation Philadelphia Trust	131 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Marie Mavin		Date of Receipt M / D / Y 10 / 23 / 2002
Mailing Address 71 W 5 St		Transaction ID: SA11A1.6795
City Ronkonkoma	State NY	Zip Code 11777
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	2441
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(1))

Full Name (Last, First, Middle Initial) B. John McGowan		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address 54 Hathaway		Transaction ID: SA11A1.6498
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation retired	2162
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(1))

Full Name (Last, First, Middle Initial) C. John McLaughlin		Date of Receipt M / D / Y 10 / 27 / 2002
Mailing Address 129 E. Erie Street		Transaction ID: SA11A1.6500
City Blauvelt	State NY	Zip Code 10913
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation consultant	2048
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(1))

SUBTOTAL of Receipts This Page (optional)	▶	1650.00
TOTAL This Period (last page this line number only)	▶	

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Robert McLaughlin		Date of Receipt M / D / Y 10 / 20 / 2002
Mailing Address 124 Hilton Avenue		Transaction ID: SA11A1.6499
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation retired	2051 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Stephen Miller		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 475 W. Merrick Road		Transaction ID: SA11A1.6501
City Valley Stream	State NY	Zip Code 11580
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	2053 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. James Murphy		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address info requested		Transaction ID: SA11A1.6503
City info requested	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer info requested	Occupation	2057 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 23 / 54

(check only one)

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

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)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Paul Murphy		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 82 Devonshire Road		Transaction ID: SA11A1.6505
City Boston	State MA	Zip Code 21001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self employed	Occupation	2058
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Donna O'Brien		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 28 Chestnut Street		Transaction ID: SA11A1.6507
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self employed	Occupation	2060
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Michael O'Grady		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 38 6th Street		Transaction ID: SA11A1.6508
City Garden City Park	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation dentist	2062
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

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

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

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

FOR LINE NUMBER: PAGE 24 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Hugh O'Kane		Date of Receipt M / D / Y 10 / 25 / 2002
Mailing Address Piping Rock Rd		Transaction ID: SA11A1.6509
City Locust Valley	State NY	Zip Code 11560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self employed	Occupation	2064
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)

Full Name (Last, First, Middle Initial) B. Andrew Paize		Date of Receipt M / D / Y 10 / 26 / 2002
Mailing Address 496 Arbuckle Avenue		Transaction ID: SA11A1.6510
City Cederhurst	State NY	Zip Code 11516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer retired	Occupation	2066
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 440.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)

Full Name (Last, First, Middle Initial) C. Thomas Poole		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address 427D Austin Blvd		Transaction ID: SA11A1.6511
City Island Park	State NY	Zip Code 11558
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer self employed	Occupation	2068
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)

SUBTOTAL of Receipts This Page (optional)	1640.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Thomas Poole		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 427D Austin Blvd		Transaction ID: SA11A1.6512
City Island Park	State NY	Zip Code 11558
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	2070
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1050.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Donald Pupke		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 146 Wright Avenue		Transaction ID: SA11A1.6513
City Malverne	State NY	Zip Code 11555
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 420.00
Name of Employer self	Occupation attorney	2071
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 420.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Anthony Rand		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 223 Seventh Street		Transaction ID: SA11A1.6514
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation dentist	2072
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	1170.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Laura Ritchie		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address 800 Front Street		Transaction ID: SA11A1.6515
City Hempstead	State NY	Zip Code 11550
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Furey and Furey	Occupation office manager	2123 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. David Robitaille		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 3084 Jericho Turnpike		Transaction ID: SA11A1.6516
City East Northport	State NY	Zip Code 11731
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self-employed	Occupation Insurance Broker	313 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Herbert Rolek		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address 68-52 79th Street		Transaction ID: SA11A1.6517
City Middle Village	State NY	Zip Code 11379
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer retired	Occupation	314 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1700.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Herbert Rolek		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address 86-52 79th Street		Transaction ID: SA11A1.6518
City Middle Village	State NY	Zip Code 11378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer retired	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Asher Roshenzamir		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 303 E. 57th Street		Transaction ID: SA11A1.6518
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	315 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Stephen Saky		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 6 Davareux Place		Transaction ID: SA11A1.6521
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	315 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1400.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 28 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Roxanne Savage		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 350 Singingwood Drive		Transaction ID: SA11A1.6522
City Holbrook	State NY	Zip Code 11741
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer info requested	Occupation info requested	317 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. William Schreyer		Date of Receipt M / D / Y 11 / 05 / 2002
Mailing Address 117 Mercer Street		Transaction ID: SA11A1.6525
City Princeton	State NJ	Zip Code 85401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	2198 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Jacob Schuster		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 12 Lyncrest Drive		Transaction ID: SA11A1.6528
City Monsey	State NY	Zip Code 10552
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation	319 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 28 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Michael Siegel		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 921 West Hill Drive		Transaction ID: SA11A1.6529
City Gates Mill	State OH	Zip Code 44040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Olympic Steel	Occupation executive	3115 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Michael Stafford		Date of Receipt M / D / Y 10 / 31 / 2002
Mailing Address 81 Second St.		Transaction ID: SA11A1.6531
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-employed	Occupation Physician	312 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. David Steinman		Date of Receipt M / D / Y 11 / 04 / 2002
Mailing Address 1185 Park Avenue		Transaction ID: SA11A1.6532
City New York	State NY	Zip Code 10128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer info requested	Occupation info requested	309 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
or each category of the
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. James Sweeney		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 811 North Brookshade Parkway		Transaction ID: SA11A1.6533
City Alpharetta	State GA	Zip Code 30004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NA	Occupation NA	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1600.00	

Full Name (Last, First, Middle Initial) B. Martin Waters		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 16 Osborne Road		Transaction ID: SA11A1.6535
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self	Occupation Attorney	31D Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Charles Willis		Date of Receipt M / D / Y 10 / 18 / 2002
Mailing Address 15 Euston Road		Transaction ID: SA11A1.6536
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer self employed	Occupation	2222 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	▶	2800.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Ezra Zika		Date of Receipt M / D / Y 10 / 17 / 2002
Mailing Address 787 5th Avenue		Transaction ID: SA11A1.6597
City New York	State NY	Zip Code 10153
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation business executive	124 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(B-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	38040.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
 or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full) Friends of Marilyn O'Grady	
Full Name (Last, First, Middle Initial) A. Nassau County Cons Comm	Date of Receipt M / D / Y U / S / A 10 / 10 / 2002
Mailing Address 105 Bobalink Lane	Transaction ID: SA11B.6506
City State Zip Code Levittown NY 11756	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	2175 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Name of Employer Receipt For: 2002 Primary X General Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. AAPS PAC		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 1801 N. Tucson Blvd		Transaction ID: SA11C.6454
City Tucson	State AZ	Zip Code 85716
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	2001
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Abraham Lincoln Leadership PAC		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address PO Box 10573		Transaction ID: SA11C.6455
City Peoria	State IL	Zip Code 61612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	2002
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. American Conservative Union		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 1007 Cameron Street		Transaction ID: SA11C.6458
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	2005
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Club for Growth		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 1776 K Street		Transaction ID: SA11C.6467
City	State	Zip Code
Washington, DC	DC	20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	2015
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

Full Name (Last, First, Middle Initial) B. DORSEY NATIONAL FUND		Date of Receipt M / D / Y 10 / 28 / 2002
Mailing Address 50 SOUTH SIXTH STREET		Transaction ID: SA11C.6472
City	State	Zip Code
MINNEAPOLIS	MN	55402
FEC ID number of contributing federal political committee. C CD0018B45		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	2021
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

Full Name (Last, First, Middle Initial) C. Friends Election Stakes		Date of Receipt M / D / Y 11 / 01 / 2002
Mailing Address 31 Rowen Rd		Transaction ID: SA11C.6478
City	State	Zip Code
Rockville Centre	NY	11570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation	2030
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

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

SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Salisbury Republican Committee		Date of Receipt M / D / Y 10 / 31 / 2002
Mailing Address 12 Choir Lane		Transaction ID: SA11C.6520
City Westbury	State NY	Zip Code 11590
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer	Occupation	132
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
		240.00

Full Name (Last, First, Middle Initial) B. SBA List Candidate Fund		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 1800 Diagonal Road		Transaction ID: SA11C.6523
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	31B
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
		2000.00

Full Name (Last, First, Middle Initial) C. 8th PAC		Date of Receipt M / D / Y 10 / 24 / 2002
Mailing Address 13501 Northwest Suite 880		Transaction ID: SA11C.6530
City Washington, DC	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	311
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
		1000.00

SUBTOTAL of Receipts This Page (optional)	▶	3240.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
 or each category of the
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FOR LINE NUMBER: PAGE 36 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
 Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Tompac Federal		Date of Receipt M / D / Y U / U / Y M / Y Y
Mailing Address PD BOX 16488		10 / 21 / 2002
City	State	Zip Code
Arlington	VA	22215
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.0534
C C00000000		Amount of Each Receipt this Period
Name of Employer		2186
Occupation		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002	Election Cycle-to-Date ▼	1000.00
Primary X General		
Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	9540.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial) A. Dr. Marilyn O'Grady		Date of Receipt M O / D D / Y Y Y Y 10 / 21 / 2002
Mailing Address PMB 162 734 Franklin Avenue		Transaction ID: SA13A.5606
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40000.00
Name of Employer Self-employed	Occupation Ophthalmologist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 225500.00	

Full Name (Last, First, Middle Initial) B. Dr. Marilyn O'Grady		Date of Receipt M O / D D / Y Y Y Y 10 / 21 / 2002
Mailing Address PMB 162 734 Franklin Avenue		Transaction ID: SA13A.5607
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Self-employed	Occupation Ophthalmologist	Chk #757B Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 235500.00	

Full Name (Last, First, Middle Initial) C. Dr. Marilyn O'Grady		Date of Receipt M O / D D / Y Y Y Y 10 / 25 / 2002
Mailing Address PMB 162 734 Franklin Avenue		Transaction ID: SA13A.5603
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20000.00
Name of Employer Self-employed	Occupation Ophthalmologist	Candidate's Personal Funds Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 255500.00	

SUBTOTAL of Receipts This Page (optional)	▶	70000.00
TOTAL This Period (last page this line number only)	▶	70000.00

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)

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

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NAME OF COMMITTEE (In Full)
 Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial)
A. Advantage, Inc

Mailing Address 1611 North Kent Street Suite 905

City Arlington State VA Zip Code 22209

Purpose of Disbursement
 Wire-

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2002
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB17.6832
 Date of Disbursement
 11 / 01 / 2002

Amount of Each Disbursement this Period
 6433.43

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

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

Mailing Address 1611 North Kent Street Suite 905

City Arlington State VA Zip Code 22209

Purpose of Disbursement
 200-recorded message

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2002
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB17.6833
 Date of Disbursement
 11 / 01 / 2002

Amount of Each Disbursement this Period
 6800.00

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

Full Name (Last, First, Middle Initial)
C. Big Apple Quick Print

Mailing Address 22 West Marie St

City Hicksville State NY Zip Code 11801

Purpose of Disbursement
 191-palm cards

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2002
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB17.6830
 Date of Disbursement
 10 / 31 / 2002

Amount of Each Disbursement this Period
 5691.23

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

SUBTOTAL of Disbursements This Page (optional) ▶ **18924.66**

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 39 / 54

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

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NAME OF COMMITTEE (In Full)
 Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial)

A. Big City Graphics

Mailing Address 4609 Eleventh St

City Long Island City State NY Zip Code 11101

Purpose of Disbursement
 193-signs

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.6825

Date of Disbursement

11 / 01 / 2002

Amount of Each Disbursement this Period

1515.50

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

Full Name (Last, First, Middle Initial)

B. Cablevision

Mailing Address P.O. Box 9202

City Uniondale State NY Zip Code 11553

Purpose of Disbursement
 206-

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.6809

Date of Disbursement

11 / 05 / 2002

Amount of Each Disbursement this Period

112.00

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

Full Name (Last, First, Middle Initial)

C. Don Durham

Mailing Address Hudson Road

City Bellerose Village State NY Zip Code 11001

Purpose of Disbursement
 218-supplies/postage

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.6827

Date of Disbursement

11 / 16 / 2002

Amount of Each Disbursement this Period

2071.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

3698.50

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

A. Full Name (Last, First, Middle Initial)
First Impressions Lithograph

Mailing Address 25 Adams Court

City Plainview State NY Zip Code 11803

Purpose of Disbursement 184-flyers

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB17.6793
Date of Disbursement 10 / 23 / 2002

Amount of Each Disbursement this Period 5967.50

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

B. Full Name (Last, First, Middle Initial)
Garden City Printers

Mailing Address 144 Cherry Valley Avenue

City West Hempstead State NY Zip Code 11552

Purpose of Disbursement 189-letters/envelopes

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB17.6818
Date of Disbursement 11 / 01 / 2002

Amount of Each Disbursement this Period 241.96

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

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

Mailing Address 40 12 Seventh Avenue

City Brooklyn State NY Zip Code 11232

Purpose of Disbursement 210-supplies/postage

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB17.6822
Date of Disbursement 11 / 16 / 2002

Amount of Each Disbursement this Period 284.71

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

SUBTOTAL of Disbursements This Page (optional) ▶ **6494.17**

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 41 / 54

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

A. Full Name (Last, First, Middle Initial)
Patty Knapp

Mailing Address 17 Adams St

City Garden City State NY Zip Code 11530

Purpose of Disbursement
185-postage

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6819
Date of Disbursement
10 / 26 / 2002

Amount of Each Disbursement this Period
250.63

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

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

Mailing Address 17 Adams St

City Garden City State NY Zip Code 11530

Purpose of Disbursement
201-postage

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6808
Date of Disbursement
11 / 01 / 2002

Amount of Each Disbursement this Period
74.00

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

C. Full Name (Last, First, Middle Initial)
McLaughlan and Associates

Mailing Address B19 Prince Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Wire-

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6794
Date of Disbursement
10 / 18 / 2002

Amount of Each Disbursement this Period
38450.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

36774.63

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

A. Full Name (Last, First, Middle Initial)
McLaughlan and Associates

Mailing Address 919 Prince Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Wire-

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB17.6795
Date of Disbursement 10 / 25 / 2002

Amount of Each Disbursement this Period 38450.00

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

B. Full Name (Last, First, Middle Initial)
McLaughlan and Associates

Mailing Address 919 Prince Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement 195-polling

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB17.6829
Date of Disbursement 11 / 01 / 2002

Amount of Each Disbursement this Period 5000.00

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

C. Full Name (Last, First, Middle Initial)
National Campaign Supply Corp.

Mailing Address Box 2522

City Key West State FL Zip Code 33045

Purpose of Disbursement 182-Second half of #8360

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: SB17.6791
Date of Disbursement 10 / 17 / 2002

Amount of Each Disbursement this Period 1500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **42950.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial)
A. Newsmax

Mailing Address P.O.Box 20989

City West Palm Beach State FL Zip Code 33416

Purpose of Disbursement
188-internet expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6828
Date of Disbursement
10 / 30 / 2002

Amount of Each Disbursement this Period
3250.00

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

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

Mailing Address P.O.Box 20989

City West Palm Beach State FL Zip Code 33416

Purpose of Disbursement
205-email letter

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6802
Date of Disbursement
11 / 02 / 2002

Amount of Each Disbursement this Period
41.50

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

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

Mailing Address P.O.Box 20989

City West Palm Beach State FL Zip Code 33416

Purpose of Disbursement
207-internet expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6823
Date of Disbursement
11 / 09 / 2002

Amount of Each Disbursement this Period
380.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **3671.50**

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 44 / 54

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

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NAME OF COMMITTEE (In Full)
 Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial)

A. Printing Xpress

Mailing Address 745 Franklin Ave.

City Garden City State NY Zip Code 11530

Purpose of Disbursement
 192-

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.6810

Date of Disbursement

11 / 01 / 2002

Amount of Each Disbursement this Period

178.18

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

Full Name (Last, First, Middle Initial)

B. Roslyn Savings Bank

Mailing Address One Jericho Plaza

City Jericho State NY Zip Code 11753

Purpose of Disbursement
 Misc Debit-

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.6787

Date of Disbursement

10 / 18 / 2002

Amount of Each Disbursement this Period

25.00

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

Full Name (Last, First, Middle Initial)

C. Roslyn Savings Bank

Mailing Address One Jericho Plaza

City Jericho State NY Zip Code 11753

Purpose of Disbursement
 Misc Debit-

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.6784

Date of Disbursement

10 / 23 / 2002

Amount of Each Disbursement this Period

10.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

213.18

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial)
A. Roslyn Savings Bank

Mailing Address One Jericho Plaza

City Jericho State NY Zip Code 11753

Purpose of Disbursement
Misc Debit-

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6786
Date of Disbursement
10 / 25 / 2002

Amount of Each Disbursement this Period
25.00

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

Full Name (Last, First, Middle Initial)
B. Roslyn Savings Bank

Mailing Address One Jericho Plaza

City Jericho State NY Zip Code 11753

Purpose of Disbursement
Misc Debit-

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6796
Date of Disbursement
11 / 01 / 2002

Amount of Each Disbursement this Period
25.00

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

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

Mailing Address 43 Lehigh Court

City Rockville Centre State NY Zip Code 11570

Purpose of Disbursement
195-supplies/postage

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2002
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.6820
Date of Disbursement
11 / 01 / 2002

Amount of Each Disbursement this Period
271.25

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

SUBTOTAL of Disbursements This Page (optional) ▶ **321.25**

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address P.O. Box 1100

City Albany State NY Zip Code 12250

Purpose of Disbursement
183-telephone

Candidate Name

Office Sought: House Senate President
Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.6789

Date of Disbursement

10 / 19 / 2002

Amount of Each Disbursement this Period

854.31

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

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address P.O. Box 1100

City Albany State NY Zip Code 12250

Purpose of Disbursement
214-telephone

Candidate Name

Office Sought: House Senate President
Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.6824

Date of Disbursement

11 / 16 / 2002

Amount of Each Disbursement this Period

726.53

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

Full Name (Last, First, Middle Initial)

C. Warfield and Company

Mailing Address 410 North Patrick Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
205-TV ads

Candidate Name

Office Sought: House Senate President
Disbursement For: 2002 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.6835

Date of Disbursement

11 / 15 / 2002

Amount of Each Disbursement this Period

11581.10

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

SUBTOTAL of Disbursements This Page (optional) ▶

13141.94

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

126189.83

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 47 / 54
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Transaction ID: SC/10.5220

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Marilyn O'Grady, - Personal funds	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PMB 162 734 Franklin Avenue	
City Garden City State NY ZIP Code 11530	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	03 rd 22 nd 2002		0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	50000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 48 / 54
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Transaction ID: SC/10.4814

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Marilyn O'Grady, - Personal funds	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PMB 162 734 Franklin Avenue	
City Garden City State NY ZIP Code 11530	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	07 th 30 th 2002		0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	50000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 40 / 54
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Transaction ID: SC/10.5602

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Marilyn O'Grady, - Personal funds	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PMB 162 734 Franklin Avenue	
City Garden City State NY ZIP Code 11530	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	09 th 04 th 2002		0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	50000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 50 / 54
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Transaction ID: SC/10.4815

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Marilyn O'Grady, - Personal funds	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PMB 162 734 Franklin Avenue	
City Garden City State NY ZIP Code 11530	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	09 th 09 th 2002		0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	20000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 51 / 54
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Transaction ID: SC/10.5604

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Marilyn O'Grady	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PMB 162 734 Franklin Avenue	
City Garden City State NY ZIP Code 11530	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15000.00	0.00	15000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 th 04 th 2002		% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	15000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 52 / 54
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Transaction ID: SC/10.5606

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Marilyn O'Grady	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Mailing Address PMB 162 734 Franklin Avenue			
City Garden City State NY ZIP Code 11530			
Original Amount of Loan 40000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 40000.00	

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	10 th 21 st 2002		% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	40000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 53 / 54
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Transaction ID: SC/10.5607

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Marilyn O'Grady	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Mailing Address PMB 162 734 Franklin Avenue			
City Garden City State NY ZIP Code 11530			
Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00	

TERMS	Date Incurred 10 th 21 st 2002	Date Due	Interest Rate % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	10000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 54 / 54
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Marilyn O'Grady

Transaction ID: SC/10.5603

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Marilyn O'Grady, - Personal funds	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PMB 162 734 Franklin Avenue	
City Garden City State NY ZIP Code 11530	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	10 th 25 th 2002		% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	20000.00
TOTALS This Period (last page in this line only)	255000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	