

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Doheny for Congress

ADDRESS (number and street)

65 High Street

Check if different than previously reported. (ACC)

Alexandria Bay

NY

13607

2. FEC IDENTIFICATION NUMBER ▼

C C00462853

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NY

21

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Jeffrey Kirkby

Signature of Treasurer Jeffrey Kirkby

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Write or Type Committee Name  
**Doheny for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	162301.81	868511.54
(b) Total Contribution Refunds (from Line 20(d)) .....	6000.00	10300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	156301.81	858211.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	708036.69	978216.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	100.00	54696.19
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	707936.69	923520.27
8. Cash on Hand at Close of Reporting Period (from Line 27).....	303968.30	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	2600000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Doheny for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2012 To: M M / D D / Y Y Y Y 09 / 30 / 2012

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	102392.00	677870.73
(ii) Unitemized.....	15609.81	30340.81
(iii) TOTAL of contributions from individuals ▶	118001.81	708211.54
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	44300.00	160300.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	162301.81	868511.54
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	6890.76
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	335000.00	335000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	335000.00	335000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	100.00	54696.19
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	23150.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	497401.81	1288248.49

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	708036.69	978216.46
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	6000.00	10250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	50.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6000.00	10300.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	714036.69	988516.46

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	520603.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	497401.81
25. SUBTOTAL (add Line 23 and Line 24).....	1018004.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	714036.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	303968.30

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Marc Abrams**

Mailing Address 310 West 52nd St, #25B

City State Zip Code  
New York NY 10019

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

Name of Employer Occupation  
Willkie Farr & Gallagher LLP Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11AI.10159**

Amount of Each Receipt this Period  
1500.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Bhupinder Bains**

Mailing Address 38 W Las Flores Ave

City State Zip Code  
Arcadia CA 91007

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

Name of Employer Occupation  
Self Employed Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 17 / 2012

**Transaction ID : SA11AI.10179**

Amount of Each Receipt this Period  
500.00

Contribution - General

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

Mailing Address 16 Indian Spring Trail

City State Zip Code  
Darien CT 06820

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

Name of Employer Occupation  
Merril Lynch Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 24 / 2012

**Transaction ID : SA11AI.10302**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Joanne Bane**

Mailing Address 60 Lawrence Avenue

City Lawrence State NY Zip Code 11559

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.10131**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**James Robert Barcomb**

Mailing Address 6 Stratton Place

City Plattsburgh State NY Zip Code 12901

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

Name of Employer Donlan & Barcomb Occupation Financial

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : SA11AI.10022**

Amount of Each Receipt this Period  
 250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Charles R Barton**

Mailing Address 66 Browns Path

City Queensbury State NY Zip Code 12804

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

Name of Employer The Barton Group Occupation Manufacturing

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11AI.10230**

Amount of Each Receipt this Period  
 500.00

Contribution - General

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George David Bednar**

Mailing Address 145 East 81st St., 3A

City New York State NY Zip Code 10028

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

Name of Employer Ladder Capital Finance Occupation Finance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.10123**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**John C Bieniek**

Mailing Address 5 Sugar Pine Road

City Queensbury State NY Zip Code 12804

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

Name of Employer Cool Insuring Agency, Inc. Occupation Insurance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : SA11AI.9635**

Amount of Each Receipt this Period  
500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Michael T Bittel**

Mailing Address 429 North Road

City Greenwich State NY Zip Code 12834

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

Name of Employer King Arthur Flour Occupation Senior VP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.10258**

Amount of Each Receipt this Period  
500.00

Contribution - General

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bart S. Bonner**

Mailing Address 23967 Country Route 67

City State Zip Code  
Watertown NY 13601

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
580.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11AI.10327**

Amount of Each Receipt this Period  
30.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Robert S Brenner**

Mailing Address 880 Western Avenue

City State Zip Code  
Albany NY 12203

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

Name of Employer Occupation  
Self Employed Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9983**

Amount of Each Receipt this Period  
250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Daniel J Burke**

Mailing Address 44 Wincrest Drive

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation  
NBT Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11AI.10452**

Amount of Each Receipt this Period  
300.00

Contribution - General

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

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

580.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brian R Campbell**

Mailing Address 148 E. Campbell Lane

City State Zip Code  
Salem NY 12865

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

Name of Employer Occupation  
Self Employed Dairy Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2012

**Transaction ID : SA11AI.9638**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Brian Carmer**

Mailing Address 13 Carlyle Terrace

City State Zip Code  
Saratoga Springs NY 12866

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

Name of Employer Occupation  
Stone Bridge Iron & Steel, Inc President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 19 / 2012

**Transaction ID : SA11AI.9827**

Amount of Each Receipt this Period  
500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Hugh Carville**

Mailing Address 110 S. William St

City State Zip Code  
Johnstown NY 12095

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : SA11AI.10243**

Amount of Each Receipt this Period  
500.00

Contribution - General

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 10 OF 125  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Arthur E Center Jr.**

Mailing Address 27 Washington St

City State Zip Code  
Cambridge NY 12816

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 17 2012

**Transaction ID : SA11AI.9784**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Arthur E Center Jr.**

Mailing Address 27 Washington St

City State Zip Code  
Cambridge NY 12816

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 22 2012

**Transaction ID : SA11AI.10479**

Amount of Each Receipt this Period  
25.00

In-kind - Sodas for Event

**C.** Full Name (Last, First, Middle Initial)  
**Timothy J Clement**

Mailing Address 24495 Bush Road

City State Zip Code  
Calcium NY 13616

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

Name of Employer Occupation  
TJ Clement Construction Co Inc Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 23 2012

**Transaction ID : SA11AI.10161**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dale W Cline**

Mailing Address 6 Palmer Drive

City Moorestown State NJ Zip Code 08057

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

Name of Employer Black Stratus Occupation Technology

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9971**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Douglas C Cline**

Mailing Address 41 Lake Ridge Road

City Bolton Landing State NY Zip Code 12814

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9972**

Amount of Each Receipt this Period  
 2500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Joanne Cline**

Mailing Address 41 Lake Ridge Road

City Bolton Landing State NY Zip Code 12814

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

Name of Employer Chronic Pain Management Occupation Administration

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9973**

Amount of Each Receipt this Period  
 2500.00

Contribution - General

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>John Clo</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012
Mailing Address 13 Lark Street		<b>Transaction ID : SA11AI.9997</b>
City Gloversville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer City of Gloversville	Occupation City Court Judge	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Michael Colello</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2012
Mailing Address 442 West Flower Ave		<b>Transaction ID : SA11AI.9795</b>
City Watertown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer City of Watertown	Occupation Government	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00	

Full Name (Last, First, Middle Initial) <b>Mr. Anthony G Collins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2012
Mailing Address 59 Clarkson Ave		<b>Transaction ID : SA11AI.10187</b>
City Potsdam	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Clarkson University	Occupation President of University	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David J Collins**

Mailing Address 500 Braim Road

City State Zip Code  
Greenfield Center NY 12833

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

Name of Employer Occupation  
D.A. Collins Consturction Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9862**

Amount of Each Receipt this Period  
2500.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Rod Cornelius**

Mailing Address P. O. Box 752

City State Zip Code  
Lake George NY 12845

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

Name of Employer Occupation  
Self Employed Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9864**

Amount of Each Receipt this Period  
2500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mary Ellen Coyne**

Mailing Address 327 Central Park, Apt 8A

City State Zip Code  
New York NY 10025

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

Name of Employer Occupation  
Request for information sent Request for information sent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.10304**

Amount of Each Receipt this Period  
500.00

Contribution - General

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 14 OF 125  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Vinnie F Crocitto Jr.**  
 Mailing Address R.R. No 2, Box 2706  
 City State Zip Code  
 Lake George NY 12845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Employed Motel Owner  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 17 2012  
**Transaction ID : SA11AI.10228**  
 Amount of Each Receipt this Period  
 250.00  
 Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Clark Currier**  
 Mailing Address 1049 Hardscrabble Road  
 City State Zip Code  
 Cadyville NY 12918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cliton Community College Education  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 17 2012  
**Transaction ID : SA11AI.9764**  
 Amount of Each Receipt this Period  
 250.00  
 Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Gary G Dake**  
 Mailing Address 516 Locust Grove Road  
 City State Zip Code  
 Greenfield Center NY 12833  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Stewarts Shops Retail  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 17 2012  
**Transaction ID : SA11AI.9976**  
 Amount of Each Receipt this Period  
 1000.00  
 Contribution - General

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John P Davidson**

Mailing Address 13 Ashley Place

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation  
D.A. Collins Construction Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9970**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James Delaune**

Mailing Address 284 Mott St, Apt 9Q

City State Zip Code  
New York NY 10012

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

Name of Employer Occupation  
Deutsche Bank Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 09 / 2012

**Transaction ID : SA11AI.9810**

Amount of Each Receipt this Period  
250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Harold Derolph**

Mailing Address 2000 Broadway  
Apt 14A

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Citadel Securities Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : SA11AI.10153**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kirpal Dhaliwal**

Mailing Address 8747 Boulder Court

City Rancho Cucamonga State CA Zip Code 91730

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

Name of Employer Request for information sent Occupation Request for information sent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11AI.10238**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Patrick A DiCerbo**

Mailing Address 1201 Troy Road

City Latham State NY Zip Code 12110

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

Name of Employer McBride Chevrolet Occupation Automobile Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9847**

Amount of Each Receipt this Period  
150.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Paul J DiFabion Jr.**

Mailing Address 1201 Lachenauer Drive

City Watertown State NY Zip Code 13601

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

Name of Employer The Benefit Services Group Occupation Insurance Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11AI.10208**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

2150.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey L Distefano</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012
Mailing Address 659 Krumkill Road		<b>Transaction ID : SA11AI.9866</b>
City Albany	State NY Zip Code 12203	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Barrett Paving Materials	Occupation President	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Lawrence L Dolhoff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2012
Mailing Address P.O. Box 308		<b>Transaction ID : SA11AI.10257</b>
City Lyons Falls	State NY Zip Code 13368	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Steven P Duffany</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 17 / 2012
Mailing Address 19204 US Rt 11		<b>Transaction ID : SA11AI.9656</b>
City Watertown	State NY Zip Code 13601-5304	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Duffany Insurance	Occupation Insurance - Business Owner	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Durkish**

Mailing Address 13489 French Settlement Road

City Harrisville State NY Zip Code 13648

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

Name of Employer Harrisville Public School Occupation Teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2012**

**Transaction ID : SA11AI.10359**

Amount of Each Receipt this Period  
**60.00**

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David G Evans**

Mailing Address 130 Manfiled St

City Belvidere State NJ Zip Code 07823

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 20 / 2012**

**Transaction ID : SA11AI.9821**

Amount of Each Receipt this Period  
**150.00**

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**David G Evans**

Mailing Address 144 Boom Hower Road

City Lyon Mt. State NY Zip Code 12952

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2012**

**Transaction ID : SA11AI.10015**

Amount of Each Receipt this Period  
**300.00**

Contribution - General

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

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

**510.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David G Evans**

Mailing Address 144 Boom Hower Road

City State Zip Code  
Lyon Mt. NY 12952

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : SA11AI.10185**

Amount of Each Receipt this Period  
100.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Shawn Faurot**

Mailing Address 756 Washington Street  
Apt. 3D

City State Zip Code  
New York NY 10014

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

Name of Employer Occupation  
Deutsche Bank Securities Inc. Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11AI.10152**

Amount of Each Receipt this Period  
500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Roscoe L Fawcett Jr.**

Mailing Address 7637 Lyonsdale Rd

City State Zip Code  
Lyons Falls NY 13368

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

Name of Employer Occupation  
Lewis County Government

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
242.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11AI.10363**

Amount of Each Receipt this Period  
100.00

Contribution - General

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter B Fitzgerald**

Mailing Address 13 Sycamore Drive

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation  
D.A. Collins Construction Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9985**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Carolyn D Fitzpatrick**

Mailing Address 837 Holcomb Street

City State Zip Code  
Watertown NY 13601

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11AI.10360**

Amount of Each Receipt this Period  
100.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Peter Nicholas Flocos**

Mailing Address 1930 Boradway, Apt 4R

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
K&L Gates LLP Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : SA11AI.10137**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>Peter Forrence</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2012
Mailing Address 3531 Lakeshore Drive		<b>Transaction ID : SA11AI.9800</b>
City Peru	State NY	Zip Code 12972
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Forrence Orchards	Occupation Farming	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Howard P Fritz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012
Mailing Address 28 Masters Commons So.		<b>Transaction ID : SA11AI.9874</b>
City Queensbury	State NY	Zip Code 12804
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Physician	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Sean Garvey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012
Mailing Address 112 Hunter Lane		<b>Transaction ID : SA11AI.9977</b>
City Queensbury	State NY	Zip Code 12804
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Garvey Auto	Occupation Automobile Sales	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sean Garvey Jr.**

Mailing Address 483 Quaker Road

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation  
Student Student

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : SA11AI.10172**

Amount of Each Receipt this Period  
2000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Susan Gazetos**

Mailing Address 15 Hickory Hollow

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation  
Martha's Dandee Creme & Motel Motel Administration

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.10001**

Amount of Each Receipt this Period  
250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Jamey Gibson**

Mailing Address 190 North Road

City State Zip Code  
Greenwich NY 12834

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

Name of Employer Occupation  
Capital Tractor Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 22 / 2012

**Transaction ID : SA11AI.10473**

Amount of Each Receipt this Period  
250.00

In-kind - Catering/Bar at Event

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey E Graham**

Mailing Address 557 Pearl Street

City State Zip Code  
Watertown NY 13601

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

Name of Employer Occupation  
Fort Pearl Inc Restaraunt Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11AI.10351**

Amount of Each Receipt this Period  
50.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Michael J Grasso**

Mailing Address 23 Rapaport Drive

City State Zip Code  
Lake George NY 12845

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

Name of Employer Occupation  
Self Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11AI.9801**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Emma L Griffen**

Mailing Address 51 North Milton Road

City State Zip Code  
Saratoga Springs NY 12866

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

Name of Employer Occupation  
Self Employed Farming

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9962**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen C Griffen**

Mailing Address 51 N. Milton Road

City State Zip Code  
Saratoga Springs NY 12866

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

Name of Employer Occupation  
Pallette Stone Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9960**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher Grubb**

Mailing Address 54 East 83rd Street, Apt 3A  
Apt. 20E

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Greenhill & Co. LLC Investment Banking

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.10125**

Amount of Each Receipt this Period  
500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**John L Haanen**

Mailing Address 48 Wincrest Drive

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation  
Self Employed Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.10454**

Amount of Each Receipt this Period  
500.00

Contribution - General

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David A Hartman**

Mailing Address 3345 Bee Cave Road

City Austin State TX Zip Code 78746

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

Name of Employer Hartman & Associates Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.10443**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Douglas Hartman**

Mailing Address 3345 Bee Cave Road

City Austin State TX Zip Code 78746

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

Name of Employer Harman Bank Occupation Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.10445**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Heck**

Mailing Address 137 S. Country Ridge Drive

City Amsterdam State NY Zip Code 12010

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

Name of Employer Alpn Haus Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.10309**

Amount of Each Receipt this Period  
 250.00

Contribution - General

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Christopher J Henderson**

Mailing Address 26667 Perch Lake Road

City State Zip Code  
Watertown NY 13601

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

Name of Employer Occupation  
NYS Government

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
435.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2012

**Transaction ID : SA11AI.9651**

Amount of Each Receipt this Period  
35.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**David Allen Henderson**

Mailing Address 27061 Three Mile Point Road

City State Zip Code  
Chaumont NY 13622

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 22 / 2012

**Transaction ID : SA11AI.10024**

Amount of Each Receipt this Period  
250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Matthew B Hicks**

Mailing Address 9 Pine Street

City State Zip Code  
Granville NY 12832

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

Name of Employer Occupation  
Town of Granville Supervisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9967**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

535.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John L Hodgkins**

Mailing Address 20 Kings Road

City State Zip Code  
Lake George NY 12845

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

Name of Employer Occupation  
W. F. Lake Corp. Textiles

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11AI.10460**

Amount of Each Receipt this Period  
300.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dan Kamensky**

Mailing Address 11 Greenway

City State Zip Code  
Roslyn NY 11576

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

Name of Employer Occupation  
Paulsen & Co. Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 04 / 2012

**Transaction ID : SA11AI.9633**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Terry Karst**

Mailing Address 1624 West Elm St.

City State Zip Code  
Oneida NY 13421

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

Name of Employer Occupation  
Self Employed Arborist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : SA11AI.10191**

Amount of Each Receipt this Period  
350.00

Contribution - General

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Eric Kaup**

Mailing Address 117 3rd Street

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation  
Hilco Trading LLC Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2012

**Transaction ID : SA11AI.9642**

Amount of Each Receipt this Period  
500.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ira Kharasch**

Mailing Address 930 5th St. Apt 202

City State Zip Code  
Sanat Monica CA 90403

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

Name of Employer Occupation  
Pachulski, Stang, Ziehl, Jones Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2012

**Transaction ID : SA11AI.9660**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Charles E Kilbourne III**

Mailing Address 51 Sperry St.

City State Zip Code  
Keeseville NY 12944

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

Name of Employer Occupation  
Kilbourne Properties Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9966**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>Mr. Gideon King</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2012
Mailing Address 430 East 86th Street		<b>Transaction ID : SA11AI.10245</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Loeb Capital	Occupation Business	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>David M Klein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2012
Mailing Address P. O. Box 121		<b>Transaction ID : SA11AI.9777</b>
City Kattskill Bay	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer North Country Engineering	Occupation Engineer	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Keshav Lall</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2012
Mailing Address 715 The Crescent		<b>Transaction ID : SA11AI.9641</b>
City Mamaroneck	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Marblegate Asset Management	Occupation Hedge Fund Analyst	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard J Lashley**

Mailing Address **2 Trinity Place**

City **Warren** State **NJ** Zip Code **07059**

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

Name of Employer **PL Capital LLC** Occupation **Investment Mgr**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 17 / 2012**

**Transaction ID : SA11AI.9817**

Amount of Each Receipt this Period  
**1000.00**

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Diane Lashway**

Mailing Address **P.O. Box 33**

City **Moriah** State **NY** Zip Code **12960**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 17 / 2012**

**Transaction ID : SA11AI.9767**

Amount of Each Receipt this Period  
**250.00**

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mark Lashway**

Mailing Address **P. O. Box 221**

City **Moriah** State **NY** Zip Code **12960**

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

Name of Employer **Essex County** Occupation **Law Enforcement**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 17 / 2012**

**Transaction ID : SA11AI.9753**

Amount of Each Receipt this Period  
**250.00**

Contribution - General

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

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 31 OF 125  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John J Layden**

Mailing Address 29 Honey Hollow Road

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation  
Adirondack Cardiology Cardiologist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 30 2012

**Transaction ID : SA11AI.9839**

Amount of Each Receipt this Period  
 250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Ledee**

Mailing Address 50 Slocum Crescent

City State Zip Code  
Forest Hills NY 11375

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

Name of Employer Occupation  
Bank of America Banking

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 22 2012

**Transaction ID : SA11AI.10133**

Amount of Each Receipt this Period  
 200.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Donald Lee**

Mailing Address 16 Ilene Drive

City State Zip Code  
Morrisonville NY 12962

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 21 2012

**Transaction ID : SA11AI.10004**

Amount of Each Receipt this Period  
 250.00

Contribution - General

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A. Van Leeper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 W 23rd St  
 Apt 6D  
 City New York State NY Zip Code 10011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GMP Securities LLC Occupation High Yield Sales  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2012  
**Transaction ID : SA11AI.9662**  
 Amount of Each Receipt this Period  
 250.00  
 Contribution - General

**B. Betty Little**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 4730  
 City Queensbury State NY Zip Code 12804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYS Senate Occupation Government  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012  
**Transaction ID : SA11AI.9749**  
 Amount of Each Receipt this Period  
 1000.00  
 Contribution - General

**C. Thomas F Longe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 574  
 City Glens Falls State NY Zip Code 12801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D.A. Collins Construction Occupation Construction  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012  
**Transaction ID : SA11AI.9959**  
 Amount of Each Receipt this Period  
 2000.00  
 Contribution - General

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

3250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>Richard Lucas</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2012
Mailing Address 8622 Whitesville Road		<b>Transaction ID : SA11AI.10006</b>
City Copenhagen	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer McQuade & Bannigan Inc.	Occupation Manager	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>Ralph G Macchio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012
Mailing Address 10 Seaman Place		<b>Transaction ID : SA11AI.9964</b>
City Deer Park	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Laundromat Owner	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Brian J MacFarland</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012
Mailing Address 201 Midline Road		<b>Transaction ID : SA11AI.9872</b>
City Amsterdam	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Fiber Conversion Inc.	Occupation Textile	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 34 OF 125  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James H MacInnis**

Mailing Address 105 W 13th Street  
Apt 7E

City State Zip Code  
New York NY 10011

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

Name of Employer Occupation  
Deutsche Bank Securities Inc. Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2012

**Transaction ID : SA11AI.9650**

Amount of Each Receipt this Period  
2500.00

Contribution - General

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

Mailing Address P. O. Box 898

City State Zip Code  
Watertown NY 13601

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9993**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Toby Malara**

Mailing Address 3316 Willow Glen Drive

City State Zip Code  
Oak Hill VA 20171

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

Name of Employer Occupation  
American Staffing Association Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11AI.10121**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert D Manz**

Mailing Address 525 Crescent Avenue

City State Zip Code  
Saratoga Springs NY 12866

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

Name of Employer Occupation  
D.A. Collins Construction Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9979**

Amount of Each Receipt this Period  
 2000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Paul A Maroun**

Mailing Address PO Box 971

City State Zip Code  
Tupper Lake NY 12986

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

Name of Employer Occupation  
NYS Senate Counsel

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11AI.10160**

Amount of Each Receipt this Period  
 150.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Martin**

Mailing Address 428 County Route 33

City State Zip Code  
Madrid NY 13660

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11AI.10222**

Amount of Each Receipt this Period  
 250.00

Contribution - General

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

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

2400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>Peter Marx</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2012
Mailing Address 20 Gurley Avenue		<b>Transaction ID : SA11AI.9756</b>
City Troy	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer V.W. Marx Construction Co	Occupation Construction	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Peter Marx</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012
Mailing Address 20 Gurley Avenue		<b>Transaction ID : SA11AI.9999</b>
City Troy	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer V.W. Marx Construction Co	Occupation Construction	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>Ted Mascott</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2012
Mailing Address P.O. Box 40		<b>Transaction ID : SA11AI.10306</b>
City Clayton	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George A Mathewson**

Mailing Address P. O. Box 192

City State Zip Code  
Lake George NY 12845

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11AI.9758**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Brian McBride**

Mailing Address 5101 US Avenue

City State Zip Code  
Plattsburgh NY 12901

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

Name of Employer Occupation  
Bill McBride Chevrolet Subaru General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11AI.9814**

Amount of Each Receipt this Period  
150.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Anne B McDonald**

Mailing Address P. O. Box 391

City State Zip Code  
Ticonderoga NY 12883

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9848**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fred J Miller Jr.**

Mailing Address Pumpkin Hollow Road

City Wells State NY Zip Code 12190

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

Name of Employer Request for information sent Occupation Request for information sent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11AI.9991**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Matthew J. Montesi Jr.**

Mailing Address 9 Hillside Drive

City Queensbury State NY Zip Code 12804

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

Name of Employer North Country Janitorial Occupation Industry

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : SA11AI.10016**

Amount of Each Receipt this Period  
2500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Ronald S Montesi**

Mailing Address 6 Cobbleston Drive

City Queensbury State NY Zip Code 12804

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

Name of Employer City of Queensbury Occupation Councilman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11AI.9760**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Christopher Morris**

Mailing Address 45 East 82nd St, 5E

City New York State NY Zip Code 10029

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

Name of Employer Wells Fargo Occupation Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.10122**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Patrick Thomas Murane**

Mailing Address 1 Point View Terrace

City Plattsburg State NY Zip Code 12901

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

Name of Employer Murnane Building Contractors Occupation General Contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2012

**Transaction ID : SA11AI.9639**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Blake T Myers**

Mailing Address 903 Park Ave, Apt 5A

City New York State NY Zip Code 10075

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

Name of Employer Amherst Securities Occupation Fixed Income Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.10138**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nicholas Nachbur**

Mailing Address 3 Lakspur Court

City Greenfield Center State NY Zip Code 12833

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

Name of Employer Champlain Wealth Management Occupation Investment Advisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : SA11AI.9637**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Frederick G Natale**

Mailing Address 341 Rt. 28

City Granville State NY Zip Code 12832

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

Name of Employer NBT Bank Occupation Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11AI.9771**

Amount of Each Receipt this Period  
250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Robert H Niehaus**

Mailing Address 770 Park Avenue

City New York State NY Zip Code 10021

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

Name of Employer GIP Capital Partners Occupation Investment Mgr

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.10329**

Amount of Each Receipt this Period  
2500.00

Contribution - General

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

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

3000.00



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

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

FOR LINE NUMBER: PAGE 41 OF 125  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sharon Noonan**

Mailing Address 418 Creekside Lane

City State Zip Code  
Old Forge NY 13420

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

Name of Employer Occupation  
Water Safari Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11AI.10220**

Amount of Each Receipt this Period  
 2500.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**T J Noonan**

Mailing Address 418 Creekside Lane

City State Zip Code  
Old Forge NY 13420

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

Name of Employer Occupation  
Enhanced Forest Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11AI.10218**

Amount of Each Receipt this Period  
 2500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Timothy O'Connor**

Mailing Address 5336 Waters Terrace

City State Zip Code  
Lowville NY 13367

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

Name of Employer Occupation  
Broadpoint Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11AI.10240**

Amount of Each Receipt this Period  
 100.00

Contribution - General

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

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

5100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Parker**

Mailing Address 29 Old Lake Road

City Lake George State NY Zip Code 12845

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : SA11AI.10007**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert E Parker**

Mailing Address 51 W 70th Street Apt.3B

City New York State NY Zip Code 10023

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

Name of Employer Clarksons Occupation Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2012

**Transaction ID : SA11AI.10017**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Parker Jr.**

Mailing Address 4630 11th Place Apt.3B

City Meridan State MS Zip Code 39305

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

Name of Employer Ibankers Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11AI.9737**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Paxon**

Mailing Address 4004 Sharp Place

City Alexandria State VA Zip Code 22304

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

Name of Employer Akin Group Occupation Senior Advisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.10294**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Jeff Peterson**

Mailing Address 17764 Inverness Curve

City Eden Prairie State MN Zip Code 55347

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

Name of Employer Cardinal Glass Industries Occupation Accountant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11AI.10140**

Amount of Each Receipt this Period  
500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Nicole S Petrosino**

Mailing Address 2328 Champlain St

City Washington State DC Zip Code 20009

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

Name of Employer Federal Government Affairs Occupation Government

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.10292**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 44 OF 125  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David L. Pierce**

Mailing Address 58 Mc Gowan Road

City Ogdensburg State NY Zip Code 13669

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

Name of Employer St. Lawrence Food Corp. Occupation Dairy

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 30 / 2012**

**Transaction ID : SA11AI.9968**

Amount of Each Receipt this Period  
**500.00**

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Gregory Pinto**

Mailing Address 1338 Route 9P

City Saratoga Springs State NY Zip Code 12866

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 22 / 2012**

**Transaction ID : SA11AI.10018**

Amount of Each Receipt this Period  
**250.00**

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Gina Poggi**

Mailing Address 315 Paddock St

City Watertown State NY Zip Code 13601

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2012**

**Transaction ID : SA11AI.10332**

Amount of Each Receipt this Period  
**500.00**

Contribution - General

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul E Pontiff**

Mailing Address 5 Sanford Lane

City: Queensbury State: NY Zip Code: 12804

FEC ID number of contributing federal political committee: C

Name of Employer: Bartlett, Pontiff et all Occupation: Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 17 / 2012

**Transaction ID : SA11AI.9816**

Amount of Each Receipt this Period: 250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Mark Purcell**

Mailing Address 566 Coffeen St

City: Watertown State: NY Zip Code: 13601

FEC ID number of contributing federal political committee: C

Name of Employer: Purcell Construction Occupation: Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 09 / 06 / 2012

**Transaction ID : SA11AI.10104**

Amount of Each Receipt this Period: 2000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory Randolph**

Mailing Address 92 Beach Ave

City: Larchmont State: NY Zip Code: 10538

FEC ID number of contributing federal political committee: C

Name of Employer: Goldman Sachs & Co. Occupation: Investment Banking

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 28 / 2012

**Transaction ID : SA11AI.10127**

Amount of Each Receipt this Period: 500.00

Contribution - General

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

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

2750.00

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

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

FOR LINE NUMBER: PAGE 46 OF 125  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. David A Renzi**

Mailing Address 23672 County Route 67

City State Zip Code  
Watertown NY 13601-9360

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

Name of Employer Occupation  
Self-employed Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 30 2012

**Transaction ID : SA11AI.9963**

Amount of Each Receipt this Period  
 250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Charles Ruggiero**

Mailing Address 216 Keyes Avenue

City State Zip Code  
Watertown NY 13601

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

Name of Employer Occupation  
Hefferon Real Estate Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
978.73

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 28 2012

**Transaction ID : SA11AI.10373**

Amount of Each Receipt this Period  
 50.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Paul J Ryan**

Mailing Address P. O. Box 145

City State Zip Code  
Kattskill Bay NY 12844

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

Name of Employer Occupation  
Self Employed Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 17 2012

**Transaction ID : SA11AI.9811**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>Steven Scalia</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2012
Mailing Address 43 Sheraton Lane		<b>Transaction ID : SA11AI.9815</b>
City Queensbury	State NY	Zip Code 12804
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Surgeon	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Keith E Scott</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2012
Mailing Address 4770 Lake Shore Drive		<b>Transaction ID : SA11AI.9820</b>
City Bolton Landing	State NY	Zip Code 12814
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer The Algonquin Restaurant	Occupation Owner	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Robert E Sharp</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2012
Mailing Address 16 Hunder Brook Lane		<b>Transaction ID : SA11AI.9819</b>
City Queensbury	State NY	Zip Code 12804
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Dentist	Contribution - General
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kimberly K Short**

Mailing Address 707 Forest Avenue

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11AI.9790**

Amount of Each Receipt this Period  
500.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Akwinder Singh**

Mailing Address 5540 High Meadow Place

City State Zip Code  
Rancho Cucamonga CA 91737

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

Name of Employer Occupation  
Comfort Inn Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : SA11AI.10176**

Amount of Each Receipt this Period  
2000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Shivnarayan Singh Sr.**

Mailing Address 2354 S 4th St

City State Zip Code  
El Centro CA 92243

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

Name of Employer Occupation  
Self Employed Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : SA11AI.10174**

Amount of Each Receipt this Period  
2000.00

Contribution - General

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

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

4500.00



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

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

FOR LINE NUMBER: PAGE 49 OF 125  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joan Hague Smith**

Mailing Address 275 Chestnut Ridge road

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 30 2012

**Transaction ID : SA11AI.9829**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Katie M Smith**

Mailing Address P. O. Box 208

City State Zip Code  
Lake Pleasant NY 12108

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

Name of Employer Occupation  
Self Employed Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 17 2012

**Transaction ID : SA11AI.9769**

Amount of Each Receipt this Period  
500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Raymond J Smith**

Mailing Address 41410 Kehoe Tract Road

City State Zip Code  
Clayton NY 13624

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

Name of Employer Occupation  
Smithe Contracting Contractor - Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 17 2012

**Transaction ID : SA11AI.9781**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rajinder S Sohi**

Mailing Address 3945 N Virginia Road, Apt 102

City State Zip Code  
Long Beach CA 90807

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

Name of Employer Occupation  
Request for information sent Request for information sent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : SA11AI.10236**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Stortecky**

Mailing Address 2189 County Highway 6

City State Zip Code  
Northville NY 12134

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

Name of Employer Occupation  
Saratoga Honda Service Parts Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9841**

Amount of Each Receipt this Period  
150.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Harold Taylor**

Mailing Address 6 Lake Avenue

City State Zip Code  
Glens Falls NY 12801

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

Name of Employer Occupation  
Taylor & Leonard Insurance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11AI.9782**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 51 OF 125  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sara Ann Tirschwell**  
 Mailing Address 1105 Park Avenue, 12D  
 City State Zip Code  
 New York NY 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 David Kempner Capital Mgt Managing Director  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 24 2012  
**Transaction ID : SA11AI.10296**  
 Amount of Each Receipt this Period  
 500.00  
 Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Frank P Turner**  
 Mailing Address 201 Little Falls Road  
 City State Zip Code  
 Cedar Grove NJ 07009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Lehman Brothers Holdings Portfolio Mgr  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 24 2012  
**Transaction ID : SA11AI.10298**  
 Amount of Each Receipt this Period  
 500.00  
 Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Thomas W Tyler**  
 Mailing Address 234 Casey Road  
 City State Zip Code  
 Schuylerville NY 12871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 New York State Manager  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 27 2012  
**Transaction ID : SA11AI.9653**  
 Amount of Each Receipt this Period  
 1000.00  
 Contribution - General

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

2000.00

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

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

FOR LINE NUMBER: PAGE 52 OF 125  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Mary L Ughetta**

Mailing Address 261 LLYds Lane

City State Zip Code  
Vero Beach FL 32963

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2012

**Transaction ID : SA11AI.9825**

Amount of Each Receipt this Period  
 250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gerard Uzzi**

Mailing Address 102 Buttonwood Dr

City State Zip Code  
Fairhaven NJ 07704

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

Name of Employer Occupation  
Milbank Tweed Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.10126**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gerard Uzzi**

Mailing Address 102 Buttonwood Dr

City State Zip Code  
Fairhaven NJ 07704

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

Name of Employer Occupation  
Milbank Tweed Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.10168**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David O Van Eenenaam**

Mailing Address 429 Flower Avenue, W

City State Zip Code  
Watertown NY 13601

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11AI.10334**

Amount of Each Receipt this Period  
250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Charles V Wait**

Mailing Address 658 North Boardway

City State Zip Code  
Saratoga Springs NY 12866

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

Name of Employer Occupation  
Adirondack Trust Company Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9989**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Mary Anne Westfall**

Mailing Address 43 Cunningham Avenue

City State Zip Code  
Glens Falls NY 12801

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

Name of Employer Occupation  
David F. Westfall MD Administration

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : SA11AI.9876**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 125
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George Whalen**

Mailing Address 185 Easton Station Road

City State Zip Code  
Greenwich NY 12834

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

Name of Employer Occupation  
Whalen Chevrolet Automobile

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11AI.10470**

Amount of Each Receipt this Period  
400.00

In-kind - Event Catering

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Peter Whitbeck**

Mailing Address 2 Point Cliff Dr

City State Zip Code  
Plattsburgh NY 12901

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

Name of Employer Occupation  
Whitbeck Associates Inc. Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
292.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2012

**Transaction ID : SA11AI.9647**

Amount of Each Receipt this Period  
42.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Lee Wise**

Mailing Address P.O. Box 913

City State Zip Code  
Noble OK 73068

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

Name of Employer Occupation  
MSCI Programmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.10128**

Amount of Each Receipt this Period  
250.00

Contribution - General

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

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

692.00

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

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

FOR LINE NUMBER: PAGE 55 OF 125  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Evelyn Wood**

Mailing Address 52 Elmer Wood Road

City Athol State NY Zip Code 12810

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

Name of Employer Town of Thurman Occupation Supervisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11Al.9779**

Amount of Each Receipt this Period  
400.00

Contribution - General

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

400.00

102392.00

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

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

FOR LINE NUMBER: PAGE 56 OF 125  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AGRI-MARK INC POLITICAL ACTION COMMITTEE**

Mailing Address 100 MILK STREET, OFFICE PARK

City State Zip Code  
METHUEN MA 01844

FEC ID number of contributing federal political committee. **C** C00141242

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11C.9996**

Amount of Each Receipt this Period  
 250.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN STAFFING ASSOCIATION STAFFINGPAC**

Mailing Address 277 S. WASHINGTON ST., SUITE 200

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00145623

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2012

**Transaction ID : SA11C.10286**

Amount of Each Receipt this Period  
 2000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED BUILDERS AND CONTRACTORS INC**

Mailing Address 4250 N FAIRFAX DR 9TH FLOOR

City State Zip Code  
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C** C30001333

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11C.10447**

Amount of Each Receipt this Period  
 5000.00

Contribution - General

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

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

7250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ASSOCIATED GENERAL CONTRACTORS NEW YORK STATE CHAPTER FEDERAL PAC

Mailing Address 10 AIRLINE DRIVE, SUITE 203

City ALBANY State NY Zip Code 12205

FEC ID number of contributing federal political committee. **C** C00382382

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2012

**Transaction ID : SA11C.9981**

Amount of Each Receipt this Period  
 2000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
ASSOCIATED GENERAL CONTRACTORS NEW YORK STATE CHAPTER FEDERAL PAC

Mailing Address 10 AIRLINE DRIVE, SUITE 203

City ALBANY State NY Zip Code 12205

FEC ID number of contributing federal political committee. **C** C00382382

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11C.10331**

Amount of Each Receipt this Period  
 1500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**FINANCIAL SERVICES ROUNDTABLE PAC**

Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
SUITE 500 SOUTH

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11C.9798**

Amount of Each Receipt this Period  
 1000.00

Contribution - Primary

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Franklin County Republican Committee**

Mailing Address c/o James Ellis  
58 Broad St.

City Tupper Lake State NY Zip Code 12986

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11C.9747**

Amount of Each Receipt this Period  
500.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**GOLDEN STATE LEADERSHIP PAC**

Mailing Address 603 E ALTON AVE STE H

City SANTA ANA State CA Zip Code 92705

FEC ID number of contributing federal political committee. **C** C00523639

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11C.10253**

Amount of Each Receipt this Period  
1500.00

Contribution - Primary

**C.** Full Name (Last, First, Middle Initial)  
**Timothy A Gusek**

Mailing Address 732 County Route 16

City Fort Ann State NY Zip Code 12827

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

Name of Employer Occupation  
Madison Managers Finance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : SA11C.10112**

Amount of Each Receipt this Period  
50.00

Contribution - General

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

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HUIZENGA FOR CONGRESS**

Mailing Address 441 WILLIAMS COURT

City State Zip Code  
ZEELAND MI 49464

FEC ID number of contributing federal political committee. **C** C00459297

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11C.9734**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**JOHN CARTER FOR CONGRESS**

Mailing Address 1717 North IH-35  
Suite 304

City State Zip Code  
Round Rock TX 78664

FEC ID number of contributing federal political committee. **C** C00371203

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11C.10255**

Amount of Each Receipt this Period  
 1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14th Street, NW  
Suite 800

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11C.10251**

Amount of Each Receipt this Period  
 2500.00

Contribution - General

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11C.10434**

Amount of Each Receipt this Period  
2500.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Lewis County Republican Committee**

Mailing Address P. O. Box 48

City Lowville State NY Zip Code 13367

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : SA11C.10109**

Amount of Each Receipt this Period  
500.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**MVP HEALTH CARE INC FEDERAL PAC**

Mailing Address 625 State Street

City Schenectady State NY Zip Code 12305

FEC ID number of contributing federal political committee. **C** C00431429

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : SA11C.10242**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial)  
NATIONAL FEDERATION OF INDEPENDENT BUSINESS/ SAVE AMERICAS FREE ENTERPRISE TRUST

**A.** Mailing Address 1201 F ST. NW  
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11C.10311**

Amount of Each Receipt this Period  
2500.00

Contribution - General

Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

**B.** Mailing Address 1605 KING STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11C.10300**

Amount of Each Receipt this Period  
5000.00

Contribution - General

Full Name (Last, First, Middle Initial)  
**NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC**

**C.** Mailing Address 1655 N. FORT MYER DR.  
SUITE 850

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11C.10435**

Amount of Each Receipt this Period  
5000.00

Contribution - General

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

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

12500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PETE SESSIONS FOR CONGRESS**

Mailing Address PO BOX 823047

City State Zip Code  
DALLAS TX 75382

FEC ID number of contributing federal political committee. **C** C00303305

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11C.10442**

Amount of Each Receipt this Period  
2000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN JEWISH COALITION**

Mailing Address 50 F STREET NW SUITE 100

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C30001374

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2012

**Transaction ID : SA11C.9743**

Amount of Each Receipt this Period  
250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Saratoga County Republican Committee**

Mailing Address 517 Broadway

City State Zip Code  
Saratoga Springs NY 12866

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : SA11C.10461**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STAND TALL AMERICA PAC (STAPAC)**

Mailing Address **PO BOX 2382**

City **AMARILLO** State **TX** Zip Code **79105**

FEC ID number of contributing federal political committee. **C C00404418**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 17 / 2012**

**Transaction ID : SA11C.10249**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**Town of Saranac Republican Committee**

Mailing Address **69 Picketts Corners Road**

City **Saranac** State **NY** Zip Code **12981**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11C.10458**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS**

Mailing Address **228 S. WASHINGTON STREET  
SUITE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00330720**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11C.10439**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Contribution - General

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

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

\_\_\_\_\_ 3250.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas W Tyler**

Mailing Address 234 Casey Road

City State Zip Code  
Schuylerville NY 12871

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

Name of Employer Occupation  
New York State Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : SA11C.10110**

Amount of Each Receipt this Period  
100.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**US CHAMBER OF COMMERCE**

Mailing Address 1615 H STREET NW

City State Zip Code  
WASHINGTON DC 20062

FEC ID number of contributing federal political committee. **C** C90013145

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2012

**Transaction ID : SA11C.10290**

Amount of Each Receipt this Period  
1000.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Warren County Republican Committee**

Mailing Address P. O. Box 4153

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11C.9807**

Amount of Each Receipt this Period  
1000.00

Contribution - General

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

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

2100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 125
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Washington County Republican Committee**

Mailing Address 5 Warren Street

City State Zip Code  
Glens Falls NY 12801

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : SA11C.9748**

Amount of Each Receipt this Period  
500.00

Contribution - General

**B.** Full Name (Last, First, Middle Initial)  
**White Creek Republican Committee**

Mailing Address 134 Broad St

City State Zip Code  
Cambridge NY 12816

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : SA11C.10107**

Amount of Each Receipt this Period  
250.00

Contribution - General

**C.** Full Name (Last, First, Middle Initial)  
**Wilton Republic Committee**

Mailing Address P. O. Box 2406

City State Zip Code  
Wilton NY 12831

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : SA11C.9882**

Amount of Each Receipt this Period  
150.00

Contribution - General

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

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

900.00

44300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 125
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms Mary E. Doheny</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 18 / 2012
Mailing Address 303 Paddock Street		<b>Transaction ID : SA13A.10316</b>
City Watertown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer D.E. Shaw and Co.	Occupation Investments	Loan to Campaign
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 30000.00	

Full Name (Last, First, Middle Initial) <b>B. Ms Mary E. Doheny</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2012
Mailing Address 303 Paddock Street		<b>Transaction ID : SA13A.10315</b>
City Watertown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer D.E. Shaw and Co.	Occupation Investments	Loan to Campaign
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 40000.00	

Full Name (Last, First, Middle Initial) <b>C. Matthew Doheny</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2012
Mailing Address 303 Paddock Street		<b>Transaction ID : SA13A.10317</b>
City Watertown	State NY	
FEC ID number of contributing federal political committee. C H0NY23057		Amount of Each Receipt this Period 300000.00
Name of Employer North Country Capital, L.L.C.	Occupation Investor	Loan to Campaign
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	335000.00
<b>TOTAL</b> This Period (last page this line number only).....	335000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 125		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. A&amp;M Printers</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 32 East Main Street		Amount of Each Disbursement this Period 74.90 <b>Transaction ID : SB17.10070</b>
City Cambridge	State NY	
Purpose of Disbursement Campaign Materials	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. A&amp;M Printers</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 32 East Main Street		Amount of Each Disbursement this Period 179.80 <b>Transaction ID : SB17.10046</b>
City Cambridge	State NY	
Purpose of Disbursement Campaign Materials	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>C. A&amp;M Printers</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 32 East Main Street		Amount of Each Disbursement this Period 74.90 <b>Transaction ID : SB17.10047</b>
City Cambridge	State NY	
Purpose of Disbursement Campaign Materials	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	329.60
<b>TOTAL</b> 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 68 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. A&amp;M Printers</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 32 East Main Street		Amount of Each Disbursement this Period 74.90 <b>Transaction ID : SB17.10100</b>
City Cambridge	State NY	
Zip Code 12816	Purpose of Disbursement Campaign Materials	Category/ Type 006
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. A&amp;M Printers</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 32 East Main Street		Amount of Each Disbursement this Period 74.90 <b>Transaction ID : SB17.10098</b>
City Cambridge	State NY	
Zip Code 12816	Purpose of Disbursement Campaign Materials	Category/ Type 006
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. American Express Collection</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address P. O. Box 360001		Amount of Each Disbursement this Period 15.90 <b>Transaction ID : SB17.9667</b>
City Fort Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Merchant Fees	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	165.70
<b>TOTAL</b> 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 69 OF 125		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Andrew Trombley</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 6 Gage Avenue		Amount of Each Disbursement this Period 3600.00 <b>Transaction ID : SB17.9693</b>
City Glens Falls	State NY	
Zip Code 12801	Purpose of Disbursement Campaign Coordinator	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Andrew Trombley</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 6 Gage Avenue		Amount of Each Disbursement this Period 3600.00 <b>Transaction ID : SB17.10053</b>
City Glens Falls	State NY	
Zip Code 12801	Purpose of Disbursement Campaign Coordinator	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Andrew Trombley</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 6 Gage Avenue		Amount of Each Disbursement this Period 3600.00 <b>Transaction ID : SB17.10090</b>
City Glens Falls	State NY	
Zip Code 12801	Purpose of Disbursement Campaign Coordinator	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10800.00
<b>TOTAL</b> 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 70 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net Gateway billing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.9666</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Merchant Svc Fees	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Authorize.net Gateway billing</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.10032</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Merchant Svc Fees	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Authorize.net Gateway billing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.10385</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Merchant Svc Fees	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	60.00
<b>TOTAL</b> 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 71 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. BPO Elks Club</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2012
Mailing Address 32 Cronin Road		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : SB17.10063</b>
City Queensbury	State NY	
Zip Code 12804	Purpose of Disbursement Fundraiser	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Brian Nichols</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 5201 CR 6		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.9696</b>
City Ogdensburg	State NY	
Zip Code 13669	Purpose of Disbursement Field Rep	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Brian Nichols</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 5201 CR 6		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.10056</b>
City Ogdensburg	State NY	
Zip Code 13669	Purpose of Disbursement Field Rep	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3450.00
<b>TOTAL</b> 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 72 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian Nichols</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2012
Mailing Address 5201 CR 6		Amount of Each Disbursement this Period 775.00 <b>Transaction ID : SB17.10418</b>
City Ogdensburg	State NY	
Purpose of Disbursement Field Rep	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. BusinessKeeping</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 26 Valdepenas Lane		Amount of Each Disbursement this Period 2493.75 <b>Transaction ID : SB17.9679</b>
City Clifton Park	State NY	
Purpose of Disbursement Bookkeeping Services	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. BusinessKeeping</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 26 Valdepenas Lane		Amount of Each Disbursement this Period 1425.00 <b>Transaction ID : SB17.9723</b>
City Clifton Park	State NY	
Purpose of Disbursement Bookkeeping Services	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4693.75
<b>TOTAL</b> 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 73 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capturing Photography</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2012
Mailing Address P.O. Box 113		Amount of Each Disbursement this Period 386.00 <b>Transaction ID : SB17.10059</b>
City Glens Falls	State NY	
Zip Code 12801	Purpose of Disbursement Photography	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Capturing Photography</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2012
Mailing Address P.O. Box 113		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : SB17.10073</b>
City Glens Falls	State NY	
Zip Code 12801	Purpose of Disbursement Photography	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Charter Business</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2012
Mailing Address P.O. Box 60588		Amount of Each Disbursement this Period 760.53 <b>Transaction ID : SB17.10409</b>
City Los Angeles	State CA	
Zip Code 90060	Purpose of Disbursement Internet	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2346.53
<b>TOTAL</b> 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 74 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Coughlin Printing Group</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2012
Mailing Address 144 Main Avenue		Amount of Each Disbursement this Period 270.89 <b>Transaction ID : SB17.9681</b>
City Watertown	State NY	
Purpose of Disbursement Campaign Materials	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Coughlin Printing Group</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2012
Mailing Address 144 Main Avenue		Amount of Each Disbursement this Period 267.62 <b>Transaction ID : SB17.9705</b>
City Watertown	State NY	
Purpose of Disbursement Campaign Materials	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Coughlin Printing Group</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2012
Mailing Address 144 Main Avenue		Amount of Each Disbursement this Period 384.16 <b>Transaction ID : SB17.10066</b>
City Watertown	State NY	
Purpose of Disbursement Campaign Materials	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	922.67
<b>TOTAL</b> 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 75 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Coughlin Printing Group</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2012
Mailing Address 144 Main Avenue		Amount of Each Disbursement this Period 1047.94 <b>Transaction ID : SB17.10067</b>
City Watertown	State NY	
Zip Code 13601	Purpose of Disbursement Campaign Materials	Category/ Type 006
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Coughlin Printing Group</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 144 Main Avenue		Amount of Each Disbursement this Period 96.98 <b>Transaction ID : SB17.10079</b>
City Watertown	State NY	
Zip Code 13601	Purpose of Disbursement Campaign Materials	Category/ Type 006
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Coughlin Printing Group</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 144 Main Avenue		Amount of Each Disbursement this Period 554.85 <b>Transaction ID : SB17.10080</b>
City Watertown	State NY	
Zip Code 13601	Purpose of Disbursement Campaign Materials	Category/ Type 006
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1699.77
<b>TOTAL</b> 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 76 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Coughlin Printing Group</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 144 Main Avenue		Amount of Each Disbursement this Period 17.98 <b>Transaction ID : SB17.10081</b>
City Watertown	State NY	
Purpose of Disbursement Campaign Materials	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Coughlin Printing Group</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address 144 Main Avenue		Amount of Each Disbursement this Period 286.18 <b>Transaction ID : SB17.10402</b>
City Watertown	State NY	
Purpose of Disbursement Campaign Materials	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Courtney Lothridge</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2012
Mailing Address 10105 119th Way North		Amount of Each Disbursement this Period 1596.77 <b>Transaction ID : SB17.10421</b>
City Seminole	State FL	
Purpose of Disbursement Field Rep	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1900.93
<b>TOTAL</b> 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 77 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. CSC Capital LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2012
Mailing Address 38 Condon Road		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.10419</b>
City Stillwater	State NY	
Zip Code 13170	Purpose of Disbursement Fundraising Consulting	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Curtis Biederbeck</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 27 North Grand Avenue		Amount of Each Disbursement this Period 915.00 <b>Transaction ID : SB17.9694</b>
City Poughkeepsie	State NY	
Zip Code 12603	Purpose of Disbursement Field Rep	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Curtis Biederbeck</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 27 North Grand Avenue		Amount of Each Disbursement this Period 2750.00 <b>Transaction ID : SB17.10055</b>
City Poughkeepsie	State NY	
Zip Code 12603	Purpose of Disbursement Field Rep	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8665.00
<b>TOTAL</b> 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 78 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Curtis Biederbeck</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 27 North Grand Avenue		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.10091</b>
City Poughkeepsie	State NY	
Purpose of Disbursement Field Rep	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Derek R. Lane</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 603 Liberty St.		Amount of Each Disbursement this Period 915.00 <b>Transaction ID : SB17.9728</b>
City Dexter	State NY	
Purpose of Disbursement Field Rep	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Derek R. Lane</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 603 Liberty St.		Amount of Each Disbursement this Period 2750.00 <b>Transaction ID : SB17.10054</b>
City Dexter	State NY	
Purpose of Disbursement Field Rep	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6665.00
<b>TOTAL</b> 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 79 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Devin Martin</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 6235 Main Street		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.9698</b>
City Westport State NY Zip Code 12993	Purpose of Disbursement Intern 001 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. Devin Martin</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 6235 Main Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.10057</b>
City Westport State NY Zip Code 12993	Purpose of Disbursement Intern 001 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>c. Digital Press</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2012
Mailing Address 387 Piaget Avenue		Amount of Each Disbursement this Period 2449.95 <b>Transaction ID : SB17.10076</b>
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Campaign Materials 006 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3949.95
<b>TOTAL</b> 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 80 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Epiphany Productions Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.9702</b>
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Fundraising	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Epiphany Productions Inc</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.10058</b>
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Fundraising	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. First Niagara Bank</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address 120 Washington St.		Amount of Each Disbursement this Period 105.00 <b>Transaction ID : SB17.10384</b>
City Watertown	State NY	
Zip Code 13601	Purpose of Disbursement Outgoing Wire Fees	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3105.00
<b>TOTAL</b> 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 81 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Niagara Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 120 Washington St.		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : SB17.10396</b>
City Watertown	State NY	
Purpose of Disbursement Fee	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. First Niagara Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 120 Washington St.		Amount of Each Disbursement this Period 31.94 <b>Transaction ID : SB17.10397</b>
City Watertown	State NY	
Purpose of Disbursement BankCard Merchant Fees	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Frontenac Crystal Springs</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address P. O. Box 328		Amount of Each Disbursement this Period 63.35 <b>Transaction ID : SB17.10404</b>
City Clayton	State NY	
Purpose of Disbursement Office drinking water 7/31/12 Statement	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.29
<b>TOTAL</b> 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 82 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jamey Gibson</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2012
Mailing Address 190 North Road		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.10475</b>
City Greenwich	State NY	
Purpose of Disbursement In-kind - Catering/Bar at Event		Category/ Type 003
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Glens Falls Business Machines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 32-34 Dix Avenue		Amount of Each Disbursement this Period 101.65 <b>Transaction ID : SB17.10065</b>
City Glens Falls	State NY	
Purpose of Disbursement Copier Rental - July Service Inv 109289		Category/ Type 001
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>C. Glens Falls Business Machines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 32-34 Dix Avenue		Amount of Each Disbursement this Period 128.61 <b>Transaction ID : SB17.10406</b>
City Glens Falls	State NY	
Purpose of Disbursement Copier Rental		Category/ Type 001
Candidate Name <b>Doheny for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	480.26
<b>TOTAL</b> 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 83 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Greener &amp; Hook</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2101 Wilson Blvd, Ste 402		Amount of Each Disbursement this Period 10000.00 <b>Transaction ID : SB17.9700</b>
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Media	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Herd Solutions LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 651 Delaware Avenue Suite 215		Amount of Each Disbursement this Period 25242.00 <b>Transaction ID : SB17.10389</b>
City Buffalo	State NY	
Zip Code 14202	Purpose of Disbursement Media	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Inn at Erlowest</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address 3178 Lake Sore Drive		Amount of Each Disbursement this Period 11050.85 <b>Transaction ID : SB17.9720</b>
City Lake George	State NY	
Zip Code 12845	Purpose of Disbursement Fundraiser	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	46292.85
<b>TOTAL</b> 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 84 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Italian American Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 192 Bellew Avenue		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.9680</b>
City Watertown	State NY	
Purpose of Disbursement Event	Category/ Type 007	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Jeffrey K. Freeland</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 795 Thornwood Drive		Amount of Each Disbursement this Period 5500.00 <b>Transaction ID : SB17.9688</b>
City Lewiston	State NY	
Purpose of Disbursement Campaign Manager	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Jeffrey K. Freeland</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2012
Mailing Address 795 Thornwood Drive		Amount of Each Disbursement this Period 5500.00 <b>Transaction ID : SB17.10051</b>
City Lewiston	State NY	
Purpose of Disbursement Campaign Manager	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11500.00
<b>TOTAL</b> 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 85 OF 125
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey K. Freeland</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 795 Thornwood Drive		Amount of Each Disbursement this Period 5500.00 <b>Transaction ID : SB17.10088</b>
City Lewiston	State NY	
Zip Code 14092	Purpose of Disbursement Campaign Manager	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Jolly Good Promotional Products</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 17 Bracken Rd		Amount of Each Disbursement this Period 21312.72 <b>Transaction ID : SB17.10095</b>
City Morrisonville	State NY	
Zip Code 12962	Purpose of Disbursement Promo Items	Category/ Type 004
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Jude R. Seymour</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 1217 Bronson Street		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.9690</b>
City Watertown	State NY	
Zip Code 13601	Purpose of Disbursement Spokesman Consulting	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31812.72
<b>TOTAL</b> 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 86 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jude R. Seymour</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 1217 Bronson Street		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.10052</b>
City Watertown	State NY	
Purpose of Disbursement Spokesman Consulting	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Jude R. Seymour</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 1217 Bronson Street		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.10089</b>
City Watertown	State NY	
Purpose of Disbursement Spokesman Consulting	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Kathleen M. Tyson</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2012
Mailing Address 1743 NE 5th St		Amount of Each Disbursement this Period 2709.67 <b>Transaction ID : SB17.10413</b>
City Ocala	State FL	
Purpose of Disbursement Fundraising/Financial Director	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12709.67
<b>TOTAL</b> 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 87 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Leland Paper Co.</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 10 Leland Drive		Amount of Each Disbursement this Period 75.75 <b>Transaction ID : SB17.10078</b>
City Glens Falls	State NY	
Zip Code 12801	Purpose of Disbursement Supplies	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Maureen E. McAuliffe</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2012
Mailing Address 1173 Co. Hwy 107		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.10061</b>
City Ft. Johnson	State NY	
Zip Code 12070	Purpose of Disbursement Field Rep	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Maureen E. McAuliffe</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 1173 Co. Hwy 107		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.10092</b>
City Ft. Johnson	State NY	
Zip Code 12070	Purpose of Disbursement Field Rep	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7075.75
<b>TOTAL</b> 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 88 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. National Grid</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 300 Erie Blvd		Amount of Each Disbursement this Period 202.39 <b>Transaction ID : SB17.10040</b>
City Syracuse	State NY	
Purpose of Disbursement Gas & electric	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: NY District: 21	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. National Grid</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2012
Mailing Address 300 Erie Blvd		Amount of Each Disbursement this Period 283.59 <b>Transaction ID : SB17.10082</b>
City Syracuse	State NY	
Purpose of Disbursement Gas & electric	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: NY District: 21	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. National Grid</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2012
Mailing Address 300 Erie Blvd		Amount of Each Disbursement this Period 254.07 <b>Transaction ID : SB17.10407</b>
City Syracuse	State NY	
Purpose of Disbursement Gas & electric	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: NY District: 21	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	740.05
<b>TOTAL</b> 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 89 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 320 FIRST STREET SE			Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.9727</b>
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement Reimbursement	Category/ Type 002		
Candidate Name <b>Doheny for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NY	District: 21		

Full Name (Last, First, Middle Initial) <b>B. North Country Coffee Cafe LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 11 South Street			Amount of Each Disbursement this Period 415.21 <b>Transaction ID : SB17.10074</b>
City Glens Falls	State NY	Zip Code 12801	
Purpose of Disbursement Catering	Category/ Type 007		
Candidate Name <b>Doheny for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NY	District: 21		

Full Name (Last, First, Middle Initial) <b>c. Northern Copy Products</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 307 S. Hamilton Street			Amount of Each Disbursement this Period 334.03 <b>Transaction ID : SB17.9725</b>
City Watertown	State NY	Zip Code 13601	
Purpose of Disbursement Copier Rental	Category/ Type 001		
Candidate Name <b>Doheny for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NY	District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5749.24
<b>TOTAL</b> 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 90 OF 125		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Northern Copy Products</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2012
Mailing Address 307 S. Hamilton Street		Amount of Each Disbursement this Period 334.03 <b>Transaction ID : SB17.9724</b>
City Watertown	State NY	
Purpose of Disbursement Copier Rental	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Northern Copy Products</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2012
Mailing Address 307 S. Hamilton Street		Amount of Each Disbursement this Period 146.32 <b>Transaction ID : SB17.10045</b>
City Watertown	State NY	
Purpose of Disbursement Copies	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Northern Copy Products</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2012
Mailing Address 307 S. Hamilton Street		Amount of Each Disbursement this Period 334.03 <b>Transaction ID : SB17.10068</b>
City Watertown	State NY	
Purpose of Disbursement Copier Rental	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	814.38
<b>TOTAL</b> 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 91 OF 125		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Northern Copy Products</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address 307 S. Hamilton Street		Amount of Each Disbursement this Period 171.32 <b>Transaction ID : SB17.10097</b>
City Watertown	State NY	
Purpose of Disbursement Copies	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Patton Boggs LLP Attorneys at Law</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2550 M Street, NW		Amount of Each Disbursement this Period 1376.00 <b>Transaction ID : SB17.9704</b>
City Washington	State DC	
Purpose of Disbursement Legal Advice	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Patton Boggs LLP Attorneys at Law</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2550 M Street, NW		Amount of Each Disbursement this Period 235.39 <b>Transaction ID : SB17.9722</b>
City Washington	State DC	
Purpose of Disbursement Reimbursement	Category/ Type 002	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1782.71
<b>TOTAL</b> 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 92 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patton Boggs LLP Attorneys at Law</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2550 M Street, NW		Amount of Each Disbursement this Period 1376.00 <b>Transaction ID : SB17.10048</b>
City Washington State DC Zip Code 20037	Purpose of Disbursement Legal Advice Category/Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 144 2nd St., 1st Floor		Amount of Each Disbursement this Period 1313.17 <b>Transaction ID : SB17.9663</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Piryx 1 & 2 Merchant Fees Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 144 2nd St., 1st Floor		Amount of Each Disbursement this Period 619.08 <b>Transaction ID : SB17.10028</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Piryx 1 & 2 Merchant Fees Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3308.25
<b>TOTAL</b> 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 93 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 144 2nd St., 1st Floor		Amount of Each Disbursement this Period 1462.64
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Piryx 1 & 2 Merchant Fees	Transaction ID : SB17.10379
Candidate Name Doheny for Congress	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. Public Opinion Strategies LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 214 N. Fayette Street		Amount of Each Disbursement this Period 17500.00
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Polling	Transaction ID : SB17.10405
Candidate Name Doheny for Congress	Category/ Type 005	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>c. Quanco Associates LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address 17890 Goodnough St.		Amount of Each Disbursement this Period 2050.00
City Adams Center	State NY	
Zip Code 13606	Purpose of Disbursement Campaign Office Rent	Transaction ID : SB17.10096
Candidate Name Doheny for Congress	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21012.64
<b>TOTAL</b> 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 94 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Quanco Associates LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 17890 Goodnough St.		Amount of Each Disbursement this Period 1025.00 <b>Transaction ID : SB17.10087</b>
City Adams Center State NY Zip Code 13606	Purpose of Disbursement Campaign Office Rent Category/Type 001	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. Roland-Kelly, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012
Mailing Address 340 South Pickett Street, #9712		Amount of Each Disbursement this Period 149346.00 <b>Transaction ID : SB17.10034</b>
City Alexandria State VA Zip Code 22304	Purpose of Disbursement Media Category/Type 004	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>c. Roland-Kelly, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2012
Mailing Address 340 South Pickett Street, #9712		Amount of Each Disbursement this Period 142591.00 <b>Transaction ID : SB17.10036</b>
City Alexandria State VA Zip Code 22304	Purpose of Disbursement Media Category/Type 004	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	292962.00
<b>TOTAL</b> 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 95 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Roland-Kelly, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 340 South Pickett Street, #9712		Amount of Each Disbursement this Period 123568.00 <b>Transaction ID : SB17.10393</b>
City Alexandria	State VA	
Zip Code 22304	Purpose of Disbursement Media	Category/ Type 004
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Roland-Kelly, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 340 South Pickett Street, #9712		Amount of Each Disbursement this Period 24972.00 <b>Transaction ID : SB17.10395</b>
City Alexandria	State VA	
Zip Code 22304	Purpose of Disbursement Media	Category/ Type 004
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Ryan Tomasich</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 12995 Hawkins Drive		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.9691</b>
City San Ramon	State CA	
Zip Code 94583	Purpose of Disbursement Fundraising Consultant	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	152040.00
<b>TOTAL</b> 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 96 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Tomasich</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2012
Mailing Address 12995 Hawkins Drive		Amount of Each Disbursement this Period 1435.33 <b>Transaction ID : SB17.10093</b>
City San Ramon State CA Zip Code 94583	Purpose of Disbursement Reimbursement Category/Type 002	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. Ryan Tomasich</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2012
Mailing Address 12995 Hawkins Drive		Amount of Each Disbursement this Period 1050.00 <b>Transaction ID : SB17.10094</b>
City San Ramon State CA Zip Code 94583	Purpose of Disbursement Fundraising Consultant Category/Type 003	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>c. Sage Payment Solutions Division</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 1750 Old Meadow Road Suite 300		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.9668</b>
City McLean State VA Zip Code 22102	Purpose of Disbursement Merchant Fees Category/Type 001	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2510.33
<b>TOTAL</b> 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 97 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sage Payment Solutions Division</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 1750 Old Meadow Road Suite 300		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.10031</b>
City McLean State VA Zip Code 22102	Purpose of Disbursement Merchant Fees 001 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. Sage Payment Solutions Division</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 1750 Old Meadow Road Suite 300		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.10388</b>
City McLean State VA Zip Code 22102	Purpose of Disbursement Merchant Fees 001 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>c. Sirk, Alicia</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2017 State Route 22B		Amount of Each Disbursement this Period 3050.00 <b>Transaction ID : SB17.9692</b>
City Morrisonville State NY Zip Code 12962	Purpose of Disbursement Local Campaign Coordinator - Consulting 001 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3100.00
<b>TOTAL</b> 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 98 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sirk, Alicia</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2012
Mailing Address 2017 State Route 22B		Amount of Each Disbursement this Period 3050.00 <b>Transaction ID : SB17.10050</b>
City Morrisonville State NY Zip Code 12962	Purpose of Disbursement Local Campaign Coordinator - Consulting Category/Type 001	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. Skyline Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2012
Mailing Address 3050 Skyline Drive		Amount of Each Disbursement this Period 499.61 <b>Transaction ID : SB17.9683</b>
City Schenectady State NY Zip Code 12306	Purpose of Disbursement Fundraising Services Category/Type 003	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>c. Skyline Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2012
Mailing Address 3050 Skyline Drive		Amount of Each Disbursement this Period 533.37 <b>Transaction ID : SB17.9685</b>
City Schenectady State NY Zip Code 12306	Purpose of Disbursement Fundraising Services Category/Type 003	
Candidate Name Doheny for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4082.98
<b>TOTAL</b> 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 99 OF 125			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Skyline Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 3050 Skyline Drive		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.9686</b>
City Schenectady	State NY	
Zip Code 12306	Purpose of Disbursement Fundraising Services	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Skyline Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 3050 Skyline Drive		Amount of Each Disbursement this Period 784.75 <b>Transaction ID : SB17.9687</b>
City Schenectady	State NY	
Zip Code 12306	Purpose of Disbursement Fundraising Services	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. SOS Action Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address P. O. Box 259		Amount of Each Disbursement this Period 2750.00 <b>Transaction ID : SB17.9701</b>
City New York	State NY	
Zip Code 10113	Purpose of Disbursement Policy Work	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6034.75
<b>TOTAL</b> 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 100 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. SOS Action Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address P. O. Box 259		Amount of Each Disbursement this Period 2750.00 <b>Transaction ID : SB17.9714</b>
City New York	State NY	
Zip Code 10113	Purpose of Disbursement Policy Work	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. SOS Action Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2012
Mailing Address P. O. Box 259		Amount of Each Disbursement this Period 2750.00 <b>Transaction ID : SB17.10417</b>
City New York	State NY	
Zip Code 10113	Purpose of Disbursement Policy Work	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. St. Lawrence County Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address P. O. Box 775		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : SB17.9719</b>
City Canton	State NY	
Zip Code 13617	Purpose of Disbursement Advertisement	Category/ Type 004
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6200.00
<b>TOTAL</b> 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 101 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Stephanie Katherine Gattrell</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2012
Mailing Address 146 Shadow Lane		Amount of Each Disbursement this Period 975.80 <b>Transaction ID : SB17.10411</b>
City Martinsburg State WV Zip Code 25403	Purpose of Disbursement Scheduler 001 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. The Factory Eatery &amp; Spirits</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address 20 Prospect Street		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : SB17.9710</b>
City Ballston Spa State NY Zip Code 12020	Purpose of Disbursement Fundraiser 003 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>c. The Prosper Group</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 435 East Main St. Suite 250		Amount of Each Disbursement this Period 1075.00 <b>Transaction ID : SB17.9706</b>
City Greenwood State IN Zip Code 46143	Purpose of Disbursement Website maintenance & hosting 004 Category/Type	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.80
<b>TOTAL</b> 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 102 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Prosper Group</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address 435 East Main St. Suite 250		Amount of Each Disbursement this Period 1825.00 <b>Transaction ID : SB17.10077</b>
City Greenwood State IN Zip Code 46143	Purpose of Disbursement Website maintenance & hosting Category/Type 004	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>B. The Prosper Group</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2012
Mailing Address 435 East Main St. Suite 250		Amount of Each Disbursement this Period 1075.00 <b>Transaction ID : SB17.10408</b>
City Greenwood State IN Zip Code 46143	Purpose of Disbursement Website maintenance & hosting Category/Type 004	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

Full Name (Last, First, Middle Initial) <b>c. Time Warner Cable</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2012
Mailing Address P. O. Box 2086		Amount of Each Disbursement this Period 943.17 <b>Transaction ID : SB17.10071</b>
City Binghamton State NY Zip Code 13902	Purpose of Disbursement Cable, Phone & Internet Services Category/Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3843.17
<b>TOTAL</b> 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 103 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Time Warner Cable</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2012
Mailing Address P. O. Box 2086		Amount of Each Disbursement this Period 263.65 <b>Transaction ID : SB17.10072</b>
City Binghamton	State NY	
Zip Code 13902	Purpose of Disbursement Cable, Phone & Internet Services	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Time Warner Cable</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address P. O. Box 2086		Amount of Each Disbursement this Period 218.28 <b>Transaction ID : SB17.10085</b>
City Binghamton	State NY	
Zip Code 13902	Purpose of Disbursement Cable, Phone & Internet Services	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. Time Warner Cable</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address P. O. Box 2086		Amount of Each Disbursement this Period 211.00 <b>Transaction ID : SB17.10086</b>
City Binghamton	State NY	
Zip Code 13902	Purpose of Disbursement Cable, Phone & Internet Services	Category/ Type 001
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	692.93
<b>TOTAL</b> 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 104 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. UPS Store</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2012
Mailing Address 107 Court Street		Amount of Each Disbursement this Period 61.97 <b>Transaction ID : SB17.10044</b>
City Watertown	State NY	
Purpose of Disbursement Postage/copies	Category/ Type 001	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Victory Promotions</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2012
Mailing Address 39 Main Street		Amount of Each Disbursement this Period 901.29 <b>Transaction ID : SB17.9707</b>
City Canton	State NY	
Purpose of Disbursement Printing	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>c. Victory Promotions</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2012
Mailing Address 39 Main Street		Amount of Each Disbursement this Period 9833.05 <b>Transaction ID : SB17.9716</b>
City Canton	State NY	
Purpose of Disbursement Printing	Category/ Type 006	
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10796.31
<b>TOTAL</b> 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 105 OF 125			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Victory Promotions</b>		M M / D D / Y Y Y Y 07 / 27 / 2012	
Mailing Address 39 Main Street		Amount of Each Disbursement this Period	
City Canton State NY Zip Code 13617		12800.54	
Purpose of Disbursement Printing		Transaction ID : SB17.9717	
Candidate Name <b>Doheny for Congress</b>		Category/ Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Victory Promotions</b>		M M / D D / Y Y Y Y 07 / 27 / 2012	
Mailing Address 39 Main Street		Amount of Each Disbursement this Period	
City Canton State NY Zip Code 13617		2075.66	
Purpose of Disbursement Printing		Transaction ID : SB17.9718	
Candidate Name <b>Doheny for Congress</b>		Category/ Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. Victory Promotions</b>		M M / D D / Y Y Y Y 07 / 27 / 2012	
Mailing Address 39 Main Street		Amount of Each Disbursement this Period	
City Canton State NY Zip Code 13617		11488.12	
Purpose of Disbursement Printing		Transaction ID : SB17.9731	
Candidate Name <b>Doheny for Congress</b>		Category/ Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	26364.32
<b>TOTAL</b> 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 106 OF 125	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Victory Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 39 Main Street		Amount of Each Disbursement this Period 2667.00 <b>Transaction ID : SB17.10392</b>
City Canton	State NY	
Zip Code 13617	Purpose of Disbursement Printing	Category/ Type 004
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. George Whalen</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2012
Mailing Address 185 Easton Station Road		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.10472</b>
City Greenwich	State NY	
Zip Code 12834	Purpose of Disbursement In-kind - Event Catering	Category/ Type 003
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3067.00
<b>TOTAL</b> This Period (last page this line number only).....	706367.30

**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 107 OF 125			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dale W Cline</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 6 Palmer Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB20A.10380</b>
City Moorestown	State NJ	
Zip Code 08057	Purpose of Disbursement Declined Contribution Check	Category/ Type
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>B. Sharon Noonan</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 418 Creekside Lane		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB20A.10382</b>
City Old Forge	State NY	
Zip Code 13420	Purpose of Disbursement Declined Contribution Check	Category/ Type
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

Full Name (Last, First, Middle Initial) <b>c. T J Noonan</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 418 Creekside Lane		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB20A.10383</b>
City Old Forge	State NY	
Zip Code 13420	Purpose of Disbursement Declined Contribution Check	Category/ Type
Candidate Name <b>Doheny for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	6000.00

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.10316**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Ms Mary E. Doheny**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

### TERMS

Date Incurred: M 09 / D 18 / Y 2012  
 Date Due: M M / D D / Y 12/31/2012  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	25000.00
<b>TOTALS</b> 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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.10315**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Ms Mary E. Doheny**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000.00 0.00 10000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 19 / 2012 M M / D D / 12/31/2012 0.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.4118**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2009

**Matthew Doheny**

Primary

General

Other (specify) ▼

Special-Primary

Mailing Address

303 Paddock Street

City

State

ZIP Code

Watertown

NY

13601

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500000.00

### TERMS

Date Incurred

06 / 29 / 2009

Date Due

11/30/2010

Interest Rate

0.00 % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

500000.00

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.5070**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Matthew Doheny**

**[PERSONAL FUNDS]**

Election: 2010

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
150000.00 0.00 150000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 01 / D 15 / Y 2010 M M / D D / Y 11/10/2010 0.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 150000.00

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.5725**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**Matthew Doheny**

Primary

General

Other (specify) ▼

Mailing Address

303 Paddock Street

City

State

ZIP Code

Watertown

NY

13601

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

100000.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

25

2010

11/30/10

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

100000.00

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.6527**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**Matthew Doheny**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
100000.00 0.00 100000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
08 / 15 / 2010 M M / D D / 11/30/10 0.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 100000.00

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.6526**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Matthew Doheny**

**[PERSONAL FUNDS]**

Election: 2010

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
150000.00 0.00 150000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
08 / 24 / 2010 M M / D D / 11/30/10 0.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... 150000.00

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.6662**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**Matthew Doheny**

Primary

General

Other (specify) ▼

Mailing Address

303 Paddock Street

City

State

ZIP Code

Watertown

NY

13601

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

150000.00

0.00

150000.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

07

2010

11/30/10

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

150000.00

**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**

NAME OF COMMITTEE (In Full) **Doheny for Congress** Transaction ID : **SC/10.6797**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Matthew Doheny</b>	<b>[PERSONAL FUNDS]</b>	Election: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 303 Paddock Street		

City	State	ZIP Code
Watertown	NY	13601

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 13 / Y 2010	M M / D D / Y 11/30/10	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="40000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.6922**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Matthew Doheny**

**[PERSONAL FUNDS]**

Election: 2010

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
200000.00 0.00 200000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 30 / 2010 M M / D D / 11/30/10 0.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 200000.00

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.7045**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Matthew Doheny**

**[PERSONAL FUNDS]**

Election: 2010

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
300000.00	0.00	300000.00

### TERMS

Date Incurred: M 09 / D 30 / Y 2010  
 Date Due: M M / D D / Y 11/30/2010  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 300000.00

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.7415**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**Matthew Doheny**

Primary

General

Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
225000.00 0.00 225000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

10

19

2010

11/30/10

0.00

% (apr)

Yes

No

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

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

**SUBTOTALS** This Period This Page (optional)..... 225000.00

**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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.7416**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**Matthew Doheny**

Primary

General

Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

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:

10 / 19 / 2010

11/30/10

0.00 % (apr)

Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.7417**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**Matthew Doheny**

Primary

General

Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

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

Date Incurred

Date Due

Interest Rate

Secured:

10

19

2010

11/30/10

0.00

% (apr)

Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.7459**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**Matthew Doheny**

Primary

General

Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
40000.00 0.00 40000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

10

21

2010

11/30/10

0.00

% (apr)

Yes  No

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.7460**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Matthew Doheny**

**[PERSONAL FUNDS]**

Election: 2010

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
60000.00 0.00 60000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y Y 0.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 60000.00

**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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.7765**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Matthew Doheny**

**[PERSONAL FUNDS]**

Election: 2010

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000.00	0.00	150000.00

**TERMS**

Date Incurred: M 10 / D 26 / Y 2010  
Date Due: M / D / Y 11/30/2010  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	150000.00
<b>TOTALS</b> 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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Doheny for Congress**

Transaction ID : **SC/10.10317**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Matthew Doheny**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
303 Paddock Street

City State ZIP Code  
Watertown NY 13601

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
300000.00 0.00 300000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 24 / 2012 M M / D D / 12/31/2012 0.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... 300000.00  
**TOTALS** This Period (last page in this line only)..... 2600000.00

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