

CERTIFIED MAIL REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
OFFICE OF RECORDS & REGISTRATION

1994 JUL 18 PM 12:05

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

1. NAME OF COMMITTEE (in full)

PETE KING FOR CONGRESS COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported.

P.O. Box 1428

CITY, STATE and ZIP CODE

SEAFORD N.Y. 11783

STATE/DISTRICT

N.Y. / 3

2. FEC IDENTIFICATION NUMBER
C 00272211

3. IS THIS REPORT AN AMENDMENT?

☐ YES

☒ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid-Year Report (Non-election Year Only)

☐ Twelfth day report preceding

(Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on

_____ in the State of _____

☐ Termination Report

This report contains activity for

☒ Primary Election

☒ General Election

☐ Special Election

☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
4/1/94 - 6/30/94 through _____		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	113,526.00	170,065.00
(b) Total Contribution Refunds (from Line 20(d))	100.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	113,426.00	169,965.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20071.23	35,383.38
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	20071.23	35,383.38
8. Cash on Hand at Close of Reporting Period (from Line 27)	219,300.65	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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

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

Type or Print Name of Treasurer

EUGENE TURNER

Signature of Treasurer

Eugene Turner

Date

JULY 15, 1994

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

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) PETE KING FOR CONGRESS		Report Covering the Period: From: APRIL 1, 1994 To: JUNE 30, 1994	
		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
I. RECEIPTS			
1. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			11(a)(I)
(i) Itemized (use Schedule A)	40,633.59		11(a)(II)
(ii) Unitemized	48,242.41		11(a)(III)
(iii) Total of contributions from individuals	88,876.00	115,715.00	11(b)
(b) Political Party Committees	24,650.00	54,350.00	11(c)
(c) Other Political Committees (such as PACs)			11(d)
(d) The Candidate			11(e)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	113,526.00	170,065.00	
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			
3. LOANS:			
(a) Made or Guaranteed by the Candidate			13(a)
(b) All Other Loans			13(b)
(c) TOTAL LOANS (add 13(a) and (b))			13(c)
4. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)			
5. OTHER RECEIPTS (Dividends, Interest, etc.)			
6. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		113,526.00	16
II. DISBURSEMENTS			
7. OPERATING EXPENDITURES		20,071.23	17
8. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			
9. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			19(a)
(b) Of All Other Loans			19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	100.00	100.00	20(a)
(b) Political Party Committees			20(b)
(c) Other Political Committees (such as PACs)			20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	100.00	100.00	20(d)
21. OTHER DISBURSEMENTS			
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		20,171.23	22
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$ 125,945.88	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$ 113,526.00	24
25. SUBTOTAL (add Line 23 and Line 24)		\$ 239,471.88	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$ 20,171.23	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$ 219,300.65	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 6
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Camilleri Louis 1603 Dewey Avenue North Bellmore NY 11710 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 5/30/94	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code D'Auria Michael 30 Rolling Drive Brookville NY 11545 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer L and K Holding Occupation Real Estate Mgr. Aggregate Year-to-Date > \$	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period \$150.00
C. Full Name, Mailing Address and ZIP Code Hasl Ludwig 20 Coot Road Locust Valley NY 11560 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation retired Aggregate Year-to-Date > \$	Date (month, day, year) 6/7/94	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and ZIP Code Israeloff Robert 289 Meadowview Avenue Hewlett NY 11557 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer self employed Occupation CPA Aggregate Year-to-Date > \$	Date (month, day, year) 5/29/94	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code Ravich Lawrence 275 Moriches Road St. James NY 11780 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer St. James Nursing Occupation co-executive Dir. Aggregate Year-to-Date > \$	Date (month, day, year) 6/1/94	Amount of Each Receipt this Period \$150.00
F. Full Name, Mailing Address and ZIP Code Stalzer Robert 853 Sprague Street Baldwin NY 11520 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Servo Corp of Occupation Vice President Aggregate Year-to-Date > \$	Date (month, day, year) 6/1/94	Amount of Each Receipt this Period \$150.00
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 2 OF 16
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Agovino Joseph 149 Abbey Lane Levittown NY 11756 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer self Occupation Psychologist Aggregate Year-to-Date > \$	Date (month, day, year) 5/12/94 5/12/94	Amount of Each Receipt this Period \$500.00 \$500.00
B. Full Name, Mailing Address and ZIP Code Baim Earl 2578 Peconic Avenue Seaford, NY 11783 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self Occupation Consultant Aggregate Year-to-Date > \$	Date (month, day, year) 4/6/94 6/9/94	Amount of Each Receipt this Period \$100.00 \$300.00
C. Full Name, Mailing Address and ZIP Code Benjamin Alvin 377 Oak Street Garden City NY 11530 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Benjamin Contracting Occupation developer Aggregate Year-to-Date > \$	Date (month, day, year) 5/19/94 6/16/94	Amount of Each Receipt this Period \$300.00 \$500.00
D. Full Name, Mailing Address and ZIP Code Binder Joseph 506 Links Drive Oceanside NY 11572 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Penguin Supermarket Occupation retail executive Aggregate Year-to-Date > \$	Date (month, day, year) 6/10/94	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Bolan Thomas 36 W 44th, 6th Floor New York NY 10036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer self Occupation Lawyer Aggregate Year-to-Date > \$	Date (month, day, year) 6/20/94	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Buckley Margaret 10 Skyline Drive Thiells NY 10984 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/20/94	Amount of Each Receipt this Period \$400.00
G. Full Name, Mailing Address and ZIP Code Bullaro Dominick 71 South Newman Street Hackensack NJ 07601 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/19/94	Amount of Each Receipt this Period \$400.00

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 3 OF 16
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Cali Frank 133 Oak Drive Upper Saddle River NJ 07458 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/18/94 Amount of Each Receipt this Period \$400.00	Aggregate Year-to-Date \$400.00
B. Full Name, Mailing Address and ZIP Code Carrello Samuel 1016 Atlantic Avenue Baldwin NY 11510 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self Occupation Insurance Agent Aggregate Year-to-Date > \$	Date (month, day, year) 6/4/94 6/10/94 Amount of Each Receipt this Period \$150.00 \$100.00	Aggregate Year-to-Date \$450.00
C. Full Name, Mailing Address and ZIP Code Clarke Patrick 27 West 29th Street New York City NY 10001 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/20/94 Amount of Each Receipt this Period \$400.00	Aggregate Year-to-Date \$400.00
D. Full Name, Mailing Address and ZIP Code Cleary John Cove Woods Road Oyster Bay NY 11771 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Farrell, Fritz Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 5/31/94 Amount of Each Receipt this Period \$300.00	Aggregate Year-to-Date \$500.00
E. Full Name, Mailing Address and ZIP Code Colleluori Mary Rose 4 Venus Road Syosset NY 11791 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/12/94 Amount of Each Receipt this Period \$600.00	Aggregate Year-to-Date \$600.00
F. Full Name, Mailing Address and ZIP Code Davis Lawrence Hilldale Lane Sands Point NY 11050 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Davis Vision Occupation Chairman Aggregate Year-to-Date > \$	Date (month, day, year) 6/15/94 Amount of Each Receipt this Period \$250.00	Aggregate Year-to-Date \$250.00
G. Full Name, Mailing Address and ZIP Code Dawes Gary 209 West Elm Street Massapequa NY 11758 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/17/94 Amount of Each Receipt this Period \$600.00	Aggregate Year-to-Date \$600.00

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 4 OF 176
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Delaney Austin 89 South Street Seaport Pr17 New York NY 10038 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Name of Employer self Occupation restaurateur Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/20/94 Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Devlin Thomas 532 West 30th Street New York NY 10019 Receipt For: ☒ Primary ☒ General ☐ Other (specify):		Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 5/20/94 Amount of Each Receipt this Period \$2,000.00
C. Full Name, Mailing Address and ZIP Code DiGiulio Nicholas 3660 Wadana Street Seaford NY 11783 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Name of Employer Occupation retired Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 4/21/94 5/18/94 Amount of Each Receipt this Period \$200.00 \$300.00
D. Full Name, Mailing Address and ZIP Code Donovan's INVESTIGATIVE SERVICE 16 East John Street Hicksville NY 11801 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Name of Employer <i>not a corporation</i> Occupation Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 6/12/94 Amount of Each Receipt this Period \$600.00
E. Full Name, Mailing Address and ZIP Code Dougherty Vincent 677 83rd Street Brooklyn NY 11228 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Name of Employer New York City Occupation Police Officer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 4/4/94 5/24/94 Amount of Each Receipt this Period \$200.00 \$300.00
F. Full Name, Mailing Address and ZIP Code Doxsee Robert 105 Mineola Avenue Point Lookout NY 11569 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Name of Employer Doxsee Sea Clam Occupation Sea Food Processor Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 6/20/94 Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Ellison Peter 2771 Central Avenue Baldwin NY 11501 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Name of Employer Town of Hempstead Occupation CSEA Presdent Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 6/15/94 Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)

5150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Detailed Summary Page

PAGE 5 OF 16
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code

Erbeli Selaudin
15 Cross Street
Closter
NJ 07624

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Information Requested

Occupation

Date (month, day, year)

5/16/94

Amount of Each Receipt this Period
\$400.00

Aggregate Year-to-Date > \$ 400.00

B. Full Name, Mailing Address and ZIP Code

Farrell Brian
1912 Wantagh Avenue
Wantagh
NY 11793

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Bee & Eiseman

Occupation

Labor Consultant

Date (month, day, year)

5/19/94
6/12/94

Amount of Each Receipt this Period
\$150.00
\$300.00

Aggregate Year-to-Date > \$ 450.00

C. Full Name, Mailing Address and ZIP Code

Faughnan John
25 Chester Street
Locust Valley
NY 11560

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

NC DPW

Occupation

Engineer

Date (month, day, year)

6/13/94

Amount of Each Receipt this Period
\$300.00

Aggregate Year-to-Date > \$ 500.00

D. Full Name, Mailing Address and ZIP Code

Finn Joseph
52 Argonne Road, East
Hampton Bays
NY 11946

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Roy Clark Invest
igation

Occupation

self employed

Date (month, day, year)

5/17/94
6/20/94

Amount of Each Receipt this Period
\$500.00
\$250.00

Aggregate Year-to-Date > \$ 750.00

E. Full Name, Mailing Address and ZIP Code

Florez Rina
54 Estate Drive
Jericho
NY 11753

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Information Requested

Occupation

Date (month, day, year)

5/20/94

Amount of Each Receipt this Period
\$400.00

Aggregate Year-to-Date > \$ 400.00

F. Full Name, Mailing Address and ZIP Code

Flynn William
320 Park Avenue
New York
NY

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Information Requested

Occupation

Date (month, day, year)

5/20/94
6/17/94

Amount of Each Receipt this Period
\$500.00
\$500.00

Aggregate Year-to-Date > \$ 1,000.00

G. Full Name, Mailing Address and ZIP Code

Folz Roger
3401 Lawson Boulevard
Oceanside
NY 11572

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Occupation

vending

Date (month, day, year)

6/1/94

Amount of Each Receipt this Period
\$300.00

Aggregate Year-to-Date > \$ 300.00

SUBTOTAL of Receipts This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 126
FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Fortunoff Louis Seven Forte Drive Old Westbury NY 11568 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Fortunoff Fine Jewelry Occupation retailer Aggregate Year-to-Date > \$ <u>\$1,000.00</u>	Date (month, day, year) 6/20/94	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Fortunoff Alan Seven Forte Drive Old Westbury NY 11568 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer Fortunoffs Occupation retailer Aggregate Year-to-Date > \$ <u>\$1,500.00</u>	Date (month, day, year) 5/19/94	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Fotiadis George 182 Cambridge Avenue Saddle Brook NJ 07662 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$ <u>\$400.00</u>	Date (month, day, year) 5/18/94	Amount of Each Receipt this Period \$400.00
D. Full Name, Mailing Address and ZIP Code Fox William 36 Bryant Avenue Staten Island NY 10306 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$ <u>\$400.00</u>	Date (month, day, year) 5/18/94	Amount of Each Receipt this Period \$400.00
E. Full Name, Mailing Address and ZIP Code Gecaj Rrustem 617 East 188th Street Bronx NY 10458 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation real estate broker Aggregate Year-to-Date > \$ <u>\$250.00</u>	Date (month, day, year) 6/20/94	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and ZIP Code Gjini Avdi 292 Glenbrook Road Stamford CT 06906 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer greenwich taxi Occupation taxi driver Aggregate Year-to-Date > \$ <u>\$250.00</u>	Date (month, day, year) 6/20/94	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Graham Roland 1426 Bellmore Avenue North Bellmore NY 11710 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Town of Hempstead Occupation accountant Aggregate Year-to-Date > \$ <u>\$300.00</u>	Date (month, day, year) 6/12/94	Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 7 OF 16
FOR LINE NUMBER 1281

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Hackett Raymonda 61 Wood Street Jefferson Valley NY 10535 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/14/94 6/12/94 6/3/94 \$900.00	Amount of Each Receipt this Period \$600.00 \$150.00 \$150.00
B. Full Name, Mailing Address and ZIP Code Hadjolian Serge 188 East 64th Street New York NY 10021 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer self Occupation Psychoanalyst Aggregate Year-to-Date > \$	Date (month, day, year) 6/20/94 \$250.00	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code Harrison Michael P.O. Box 495 Bethpage NY 11714-0495 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Hofstra Health Dome Occupation Marketing Aggregate Year-to-Date > \$	Date (month, day, year) 6/6/94 \$450.00	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Hartigan Michael 10 Harvard Avenue Merrick NY 11566 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/20/94 \$400.00	Amount of Each Receipt this Period \$400.00
E. Full Name, Mailing Address and ZIP Code Hughes Brendan 56 Briar Hill Drive Yonkers NY 10710 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Hughes and Hughes Construction Occupation president Aggregate Year-to-Date > \$	Date (month, day, year) 5/20/94 \$800.00	Amount of Each Receipt this Period \$800.00
F. Full Name, Mailing Address and ZIP Code Hymes Robert 52 Woodhail Street Lido Beach NY 11561 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation retired Aggregate Year-to-Date > \$	Date (month, day, year) 4/30/94 6/24/94 \$300.00	Amount of Each Receipt this Period \$200.00 \$100.00
G. Full Name, Mailing Address and ZIP Code Iadanza Joseph 48 Maple Run Drive Jericho NY 11753 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/20/94 \$600.00	Amount of Each Receipt this Period \$600.00

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 8 OF 16
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code

Keogh Gerard
228 Winsor Place
Brooklyn
NY 11215

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Brooklyn DA Office

Date (month,
day, year)

5/20/94

Amount of Each
Receipt this Period
\$400.00

Occupation

Attorney

Aggregate Year-to-Date > \$ 400.00

B. Full Name, Mailing Address and ZIP Code

Khan Farouque
95 Karol Place
Jericho
NY 11753

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Nassau County

Date (month,
day, year)

6/6/94

Amount of Each
Receipt this Period
\$250.00

Occupation

Physician

Aggregate Year-to-Date > \$ 250.00

C. Full Name, Mailing Address and ZIP Code

King Joseph
4044 Darby Lane
Seaford
NY 11783

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Freeport Police
Department

Date (month,
day, year)

6/6/94

Amount of Each
Receipt this Period
\$300.00
\$150.00

Occupation

police chief

Aggregate Year-to-Date > \$ 450.00

D. Full Name, Mailing Address and ZIP Code

Kusturic Ante
145 Schmitt Boulevard
East Farmingdale
NY 11735

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

4/17/94

Amount of Each
Receipt this Period
\$1,000.00

Occupation

fabric manufacturer

Aggregate Year-to-Date > \$ 1,000.00

E. Full Name, Mailing Address and ZIP Code

Lajqi Syle
197 Manhattan Avenue
Hawthorne
NY 10532

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

2130 Williamsbridge
Corp.

Date (month,
day, year)

6/20/94

Amount of Each
Receipt this Period
\$250.00

Occupation

Managing Agent

Aggregate Year-to-Date > \$ 250.00

F. Full Name, Mailing Address and ZIP Code

Leiter Stephen
3417 Poplar Street
Oceanside
NY 11572

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

East Coast Abstract

Date (month,
day, year)

6/20/94

Amount of Each
Receipt this Period
\$500.00

Occupation

attorney

Aggregate Year-to-Date > \$ 500.00

G. Full Name, Mailing Address and ZIP Code

Lewis Gerald
251 Avenue W
Brooklyn
NY 11223

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Summit Lighting

Date (month,
day, year)

5/19/94

Amount of Each
Receipt this Period
\$400.00

Occupation

saleman

Aggregate Year-to-Date > \$ 400.00

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 9 OF 16
FOR LINE NUMBER 1141

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code

Lokaj Mett
221 West 82nd Street Apt 1b
New York
NY 10024

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Walter and Samuels

Date (month,
day, year)

6/20/94

Amount of Each
Receipt this Period
\$250.00

Occupation

superintendent

Aggregate Year-to-Date > \$ 250.00

B. Full Name, Mailing Address and ZIP Code

Loughman Robert
121 Call Hollow Road
Pomona
NY 10970

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

retired

Aggregate Year-to-Date > \$ 250.00

Date (month,
day, year)

4/14/94
6/1/94

Amount of Each
Receipt this Period
\$100.00
\$150.00

C. Full Name, Mailing Address and ZIP Code

MacDonald Jay
488 Madison Avenue
New York
NY 10022

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Inc. Magazine

Date (month,
day, year)

6/20/94

Amount of Each
Receipt this Period
\$250.00

Occupation

Aggregate Year-to-Date > \$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mack David
370 West Passaic Street
Rochelle Park
NJ 07662

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

6/1/94

Amount of Each
Receipt this Period
\$250.00

Occupation

real estate develop

Aggregate Year-to-Date > \$ 250.00

E. Full Name, Mailing Address and ZIP Code

Mahoney Richard
47-39 157th Street
Flushing
NY 11355

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

5/17/94
6/20/94

Amount of Each
Receipt this Period
\$500.00
\$250.00

Occupation

private investigat.

Aggregate Year-to-Date > \$ 750.00

F. Full Name, Mailing Address and ZIP Code

Marcellino Patricia
30 Cheshire Avenue
Syosset
NY 11791

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Adelphi University

Date (month,
day, year)

6/12/94

Amount of Each
Receipt this Period
\$300.00

Occupation

administrator

Aggregate Year-to-Date > \$ 300.00

G. Full Name, Mailing Address and ZIP Code

Marie Rad
2045 Milburn Ave.
Baldwin
NY 11510

Receipt For: ☒ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

4/17/94

Amount of Each
Receipt this Period
\$1,733.59

Occupation

physician

Aggregate Year-to-Date > \$ 1,733.59

SUBTOTAL of Receipts This Page (optional)

3783.59

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 10 OF 16
FOR LINE NUMBER 1101

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Mathews P.R. 1060 Clay Avenue Pelham Manor NY 10803 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/10/94	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and ZIP Code McCann James 1600 Stewart Avenue Westbury NY 11590 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer 800 Flowers Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 6/17/94	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code McKeon Bernard 193-15 Station Road Flushing NY 11359 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/20/94	Amount of Each Receipt this Period \$400.00
D. Full Name, Mailing Address and ZIP Code Murray Stephen 59 Arnold Drive Stamford NY 06905 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Chemical Venture Partners Occupation Principal Aggregate Year-to-Date > \$	Date (month, day, year) 6/20/94	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Murray J. Brendan 43-69 10 ST LONG ISLAND CITY, N.Y. 11101 NY Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NEWPORT PAINTING Occupation PRESIDENT Aggregate Year-to-Date > \$	Date (month, day, year) 5/20/94	Amount of Each Receipt this Period \$400.00
F. Full Name, Mailing Address and ZIP Code O'Brien Kenneth 165 East Loines Merrick NY 11566 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer O'Brien Mgt. Inc. Occupation investment advisor Aggregate Year-to-Date > \$	Date (month, day, year) 6/15/94	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code O'Connor Gerard 209 Renison Drive Westbury NY 11590 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation retired Aggregate Year-to-Date > \$	Date (month, day, year) 6/1/94	Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 11 OF 16
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code O'Donnell James 3041 Shore Drive Merrick NY 11566 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Nat West Bank Occupation president Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/11/94	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code O'Dowd Neil 432 Park Avenue New York NY Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer publisher Occupation Irish Voice newspaper Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/20/94	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code O'Hara Walter 36 East 36th Street New York NY 10016 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Allen and Co Inc Occupation banker Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/13/94	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code O'Meara William 472 Manchester Road Yorktown Heights NY 10598 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/23/94	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code O'Sullivan Michael 45-18 42nd Street Long Island City NY 11104 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 5/5/94	Amount of Each Receipt this Period \$400.00
F. Full Name, Mailing Address and ZIP Code Patino Antonio 2136 Seamans Neck Road Seaford NY 11783 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Local #3AFLCIO Occupation Union Rep. Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/10/94	Amount of Each Receipt this Period \$300.00
G. Full Name, Mailing Address and ZIP Code Perlmutter Nathan 1951 Helen Court Merrick NY 11566 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Forest Hills Investment Co. Occupation insurance agent Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/6/94	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

3200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 12 OF 16
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Peter Baldur 235 Maple Avenue Smithtown NY 11787 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/17/94	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and ZIP Code Poole Thomas 4270 Austin Boulevard Island Park NY 11558 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Hallen Construct. Occupation President CEO Aggregate Year-to-Date > \$	Date (month, day, year) 5/18/94 6/6/94	Amount of Each Receipt this Period \$250.00 \$250.00
C. Full Name, Mailing Address and ZIP Code Reed Glenn Perri 73 Collins Avenue Sayville NY 11782 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Teleway, Inc. Occupation chief financial off Aggregate Year-to-Date > \$	Date (month, day, year) 6/20/94	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Shaughnessy Thomas 1171 Webber Avenue South Hempstead NY 11550 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/3/94	Amount of Each Receipt this Period \$300.00
E. Full Name, Mailing Address and ZIP Code Tarrant Patrick 617 Elm Street Kearny NJ 07032 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/20/94	Amount of Each Receipt this Period \$400.00
F. Full Name, Mailing Address and ZIP Code Tilles Roger 7600 Jericho Turnpike Woodbury NY 11797 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Tilles Investment Co Occupation real estate develop Aggregate Year-to-Date > \$	Date (month, day, year) 6/2/94	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code Walker Jeffrey 16 Hearthstone Lane Wilton CT 06897 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Chemical Bank Occupation Venture Capitalist Aggregate Year-to-Date > \$	Date (month, day, year) 6/13/94	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 13 OF 16
FOR LINE NUMBER 12A1

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Walsh Thomas 344 Knollwood Lane Seaford NY 11783 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NC DPW Occupation Superintendent Aggregate Year-to-Date > \$	Date (month, day, year) 5/31/94 \$800.00	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and ZIP Code Wheatley Elizabeth 4061 Burke Court Seaford NY 11783 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Town of Hempstead Occupation Clerk Aggregate Year-to-Date > \$	Date (month, day, year) 4/26/94 5/31/94 \$250.00	Amount of Each Receipt this Period \$100.00 \$150.00
C. Full Name, Mailing Address and ZIP Code Wolkow Howard 3167 Messick Avenue Oceanside NY 11572 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Information Requested</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/24/94 \$250.00	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 14 OF 16
FOR LINE NUMBER 1191

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Axelrod, Cornachio, Famighetti 98 Willis Avenue Mineola, NY 11501 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>see attached for allocation</i> self Occupation law firm Aggregate Year-to-Date > \$ <u>\$600.00</u>	Date (month, day, year) 6/9/94	Amount of Each Receipt this Period \$600.00
B. Full Name, Mailing Address and ZIP Code Elovich & Adell 164 West Park Avenue Long Beach NY 11561 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>see attached for allocation</i> Elovich and Adell Occupation law partnership Aggregate Year-to-Date > \$ <u>\$450.00</u>	Date (month, day, year) 6/6/94	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code Gallagher and Walker 52 Covert Avenue Stewart Manor NY 11530 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>partnership allocation request</i> Occupation law partnership Aggregate Year-to-Date > \$ <u>\$250.00</u>	Date (month, day, year) 6/20/94	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Murphy, Bartol & O'Brien 22 Jericho Turnpike Mineola NY 11501 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>see attached for allocation</i> Occupation law partnership Aggregate Year-to-Date > \$ <u>\$300.00</u>	Date (month, day, year) 5/26/94	Amount of Each Receipt this Period \$300.00
E. Full Name, Mailing Address and ZIP Code O'Dwyer and Bernstein 56 Duane Street New York NY 10007 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>partnership allocation requested</i> Occupation law partnership Aggregate Year-to-Date > \$ <u>\$1,000.00</u>	Date (month, day, year) 5/26/94	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 15 OF 16
FOR LINE NUMBER 11A i

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AYELROD, CORNACHIO, FAMIGHETTI		6/9/94	600.00 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 600.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL AXELROD 98 WILLIS AVE MINEOLA, N.Y. 11501		6/9/94	200.00 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 200	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH FAMIGHETTI 98 WILLIS AVE MINEOLA, N.Y. 11501		6/9/94	200.00 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 200	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANTHONY W. CORNACHIO 98 WILLIS AVE MINEOLA, N.Y. 11501		6/9/94	200.00 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 200	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELOVICH & ADILL		6/6/94	250.00 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 450.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LAWRENCE ELOVICH 164 W. PARK AV. LONG BEACH, N.Y. 11561		6/6/94	250.00 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 450.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 16 OF 16
FOR LINE NUMBER
11 A 1

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NAME OF COMMITTEE (In Full)			
PETE KING FOR CONGRESS			
A. Full Name, Mailing Address and ZIP Code MURPHY, BARTOL & O'BRIEN		Name of Employer Occupation 	Date (month, day, year) 5/26/94
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Amount of Each Receipt this Period 300.00 MEMO	
B. Full Name, Mailing Address and ZIP Code ERNEST BARTOL 22 JERICHO TRKE. MINEOLA, N.Y. 11501		Name of Employer Occupation ATTORNEY	Date (month, day, year) 5/26/94
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Amount of Each Receipt this Period 150.00 MEMO	
C. Full Name, Mailing Address and ZIP Code KEVIN O'BRIEN 22 JERICHO TRKE MINEOLA, N.Y. 11501		Name of Employer Occupation ATTORNEY	Date (month, day, year) 5/26/94
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Amount of Each Receipt this Period 150.00 MEMO	
D. Full Name, Mailing Address and ZIP Code 		Name of Employer Occupation 	Date (month, day, year)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Amount of Each Receipt this Period 	
E. Full Name, Mailing Address and ZIP Code 		Name of Employer Occupation 	Date (month, day, year)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Amount of Each Receipt this Period 	
F. Full Name, Mailing Address and ZIP Code 		Name of Employer Occupation 	Date (month, day, year)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Amount of Each Receipt this Period 	
G. Full Name, Mailing Address and ZIP Code 		Name of Employer Occupation 	Date (month, day, year)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Amount of Each Receipt this Period 	
SUBTOTAL of Receipts This Page (optional)			
TOTAL This Period (last page this line number only)			40633.59

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 1 OF 4
FOR LINE NUMBER 116

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code American Bankers Association 1120 Connecticut Avenue NW Washington DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 5/7/94	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code American Insurance Asso. PAC 1130 Connecticut Ave. NW Washington DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 4/27/94	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code American Medical PAC 1101 Vermont Avenue NW Washington DC 20005 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 4,650.00	Date (month, day, year) 3/25/94	Amount of Each Receipt this Period \$4,650.00
D. Full Name, Mailing Address and ZIP Code ASTAPAC 1101 King Street Alexandria VA 22314 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 3/30/94	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Carpenters Legis.Improve. Comte 101 Constitution Avenue Washington DC 20001 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 5/18/94	Amount of Each Receipt this Period \$2,500.00
F. Full Name, Mailing Address and ZIP Code Chase PAC One Chase Plaza, 9th Floor New York NY 10081 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/21/94	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code Chemical Bank Fund for Good Govt. 270 Park Avenue New York NY 10017 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 6/8/94	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

9150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Citicorp Voluntary PAC 1101 Pennsylvania Ave. NW Washington DC 20004 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 6/17/94	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code COM PAC 900 19th Street, NW, STE.400 Washington DC 20006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 4/4/94	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Countdown to Majority PAC P.O. Box 533971 Orlando FL 32803-9998 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/19/94	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Fleet Financial Group PAC 50 Kennedy Plaza Providence RI 02903 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 3/13/94	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code Keycorp Federal PAC 1 Keycorp Plaza Albany NY 12207 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/3/94	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code MEBA PAC 444 North Capital Street Washington DC 20001 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 3/1/94	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code Morgan Companies PAC 60 Wall Street New York NY 10260 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 8/21/93	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 3 OF 4
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code National Beer Wholesalers Assn 1100 S. Washington St Alexandria VA 22314-4494 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 5/11/94	Amount of Each Receipt this Period \$5,000.00
B. Full Name, Mailing Address and ZIP Code New York Life PAC 51 Madison Avenue New York NY 10010 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code NFIB Safe Trust 53 Century Boulevard Nashville TN 37214 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 2/25/94	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Panhandle Easter Corp. PAC 5400 Westheimer Houston TX 77056 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/2/94	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code Penney PAC P.O. BOX 227481 Dallas TX 75222 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 3/7/94	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Pfizer PAC 235 East 42nd Street New York NY 10017 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code PIA PAC 400 North Washington Street Alexandria VA 22314 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$ 000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 14
FOR LINE NUMBER 01 C

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code

Salomon Brothers Inc. PAC
1455 Pennsylvania Ave. NW
Washington
DC 20004

Name of Employer

Date (month,
day, year)

4/12/94

Amount of Each
Receipt this Period

\$500.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

B. Full Name, Mailing Address and ZIP Code

Seafarers PAC
5201 Auth Way
Camp Springs
MD 20746

Name of Employer

Date (month,
day, year)

4/6/94

Amount of Each
Receipt this Period

\$1,000.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000.00

C. Full Name, Mailing Address and ZIP Code

UPSPAC
316 Pennsylvania Avenue SE
Washington
DC 20003

Name of Employer

Date (month,
day, year)

5/3/94

Amount of Each
Receipt this Period

\$500.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 700.00

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

24650.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code Manor East Jerusalem Avenue Massapequa NY 11758	Purpose of Disbursement 6/12 Fundraiser Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/8/94 6/23/94	Amount of Each Disbursement This Period 2021.18 231.94
B. Full Name, Mailing Address and ZIP Code United States Postmaster Cannon HOB Washington DC 20515	Purpose of Disbursement postage Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/6/94 5/10/94 5/16/94	Amount of Each Disbursement This Period 287.10 287.10 147.66
C. Full Name, Mailing Address and ZIP Code United States Postmaster	Purpose of Disbursement postage Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/13/94 6/19/94 6/8/94	Amount of Each Disbursement This Period 146.16 287.10 287.10
D. Full Name, Mailing Address and ZIP Code United States Postmaster	Purpose of Disbursement postage postal box rental permit fees Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/23/94 6/24/94 5/25/94	Amount of Each Disbursement This Period 87.00 24.50 410.00
E. Full Name, Mailing Address and ZIP Code Thomas Lankford PO Box 1504 Washington, DC	Purpose of Disbursement record reprint, invitations flag certificates Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/10/94 6/7/94 6/21/94	Amount of Each Disbursement This Period 28.25 736.50 20.00
F. Full Name, Mailing Address and ZIP Code Nassau County Republican Com 164 Post Ave Westbury, NY 11590	Purpose of Disbursement printing ticket purchase poll survey Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/23/94 6/3/94 6/8/94	Amount of Each Disbursement This Period 400.00 580.00 30.00
G. Full Name, Mailing Address and ZIP Code ECM Leasing PO Box 214 Witliston Park, NY.	Purpose of Disbursement typewriter rental, ribbons disks Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/24/94 6/8/94 5/16/94	Amount of Each Disbursement This Period 83.61 41.02 203.90
H. Full Name, Mailing Address and ZIP Code Pete King 1442 Roth Rd. Seaford, NY 11783	Purpose of Disbursement reimb. for tolls, parking, taxis, and meals Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/24/94 4/14/94	Amount of Each Disbursement This Period 106.43 66.00
I. Full Name, Mailing Address and ZIP Code Plaza Hotel Central Park South NY, NY.	Purpose of Disbursement 5/20/94 fundraiser Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/24/94	Amount of Each Disbursement This Period 6999.93

SUBTOTAL of Disbursements This Page (optional)

13,512.48

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 2 OF 3
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code E. Pira 1665 Paul Lane Seaford, NY 11783	Purpose of Disbursement printing of letters and envelopes Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/3/94	Amount of Each Disbursement This Period 716.00
B. Full Name, Mailing Address and ZIP Code Hofstra University Club Hempstead, NY 11550	Purpose of Disbursement breakfast Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/8/94	Amount of Each Disbursement This Period 865.64
C. Full Name, Mailing Address and ZIP Code Jewish World 115 Middle Neck Rd Great Neck, NY 11021	Purpose of Disbursement Ad Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/10/94	Amount of Each Disbursement This Period 288.00
D. Full Name, Mailing Address and ZIP Code Willow Graphics PO Box 550 Wantagh, NY 11793	Purpose of Disbursement printing of tickets Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/12/94	Amount of Each Disbursement This Period 257.58
E. Full Name, Mailing Address and ZIP Code Nassau County Conserv. Comm. 36 Sunrise St. Plainview, NY 11803	Purpose of Disbursement ticket purchase Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/10/94	Amount of Each Disbursement This Period 400.00
F. Full Name, Mailing Address and ZIP Code NY State Republican Comm ALBANY, N.Y.	Purpose of Disbursement ticket purchase Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/10/94	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code Town of Hempstead Repub. Com. 164 Post Ave Westbury, NY 11590	Purpose of Disbursement contribution Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/23/94	Amount of Each Disbursement This Period 200.00
H. Full Name, Mailing Address and ZIP Code AMERICAN EXPRESS PO Box 114 Newark, NJ 07101	Purpose of Disbursement plane ticket Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/31/94	Amount of Each Disbursement This Period 300.00
I. Full Name, Mailing Address and ZIP Code DELTA AIRLINES NATIONAL AIRPORT WASHINGTON, D.C.	Purpose of Disbursement plane ticket Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/31/94	Amount of Each Disbursement This Period 300.00 MEHO

SUBTOTAL of Disbursements This Page (optional)

3527.22

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 3 OF 3
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chemical Bank PO Box 8507 Hicksville, NY 11801	constituent meals picture framing messenger Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4/11/94 5/10/94 6/7/94	62.65 359.56 303.63
B. Full Name, Mailing Address and ZIP Code Abco Art Sunrise Hwy Bellmore NY 11710	Purpose of Disbursement picture framing Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4/9/94 5/7/94	131.08 140.05
C. Full Name, Mailing Address and ZIP Code Dr. Rad Marie 2045 Milburn Ave Baldwin, NY 11501	Purpose of Disbursement fund raising Dty at his home Disbursement for: ☒ Primary ☒ General ☐ Other (specify)	4/17/94	1733.59 (in kind)
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2,459.43

TOTAL This Period (last page this line number only)

19,499.13