

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

Friends of George Demos

ADDRESS (number and street) PO BOX 378

Check if different than previously reported. (ACC) Ronkonkoma NY 11779

2. **FEC IDENTIFICATION NUMBER** ▼ C C00549816

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

CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT

NY 01

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

01 / 01 / 2014 through 03 / 31 / 2014

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 Robert Cole

Signature of Treasurer Robert Cole *[Electronically Filed]* Date M M / D D / Y Y Y Y

06 / 12 / 2014

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									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of George Demos

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))....	35245.00	234155.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	35245.00	234155.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	815686.22	964808.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	815686.22	964808.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1269346.98	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2000000.00	

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

Friends of George Demos

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30700.00	229325.00
(ii) Unitemized.....	4545.00	4830.00
(iii) TOTAL of contributions from individuals ▶	35245.00	234155.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	35245.00	234155.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	200000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	200000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	35245.00	2234155.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	815686.22	964808.02
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	815686.22	964808.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2049788.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	35245.00
25. SUBTOTAL (add Line 23 and Line 24).....	2085033.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	815686.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1269346.98

**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 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Arthur Anton		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 32 Samuel Way		Transaction ID : SA11AI.4574
City North Andover	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Demetrios Bousis		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 2119 Post Road		Transaction ID : SA11AI.4532
City North Brook	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Cermak Produce Inc	Occupation Chairman	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. Justin Bozonelis		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 315 East 56th Street		Transaction ID : SA11AI.4556
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 Cantor Fitzgerald	Occupation Capital Markets	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 58
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Craig Carpenito

Mailing Address 16 Forest Lane

City Monroe Township State NJ Zip Code 08831

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

Name of Employer Alston & Bird, LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4558

Amount of Each Receipt this Period
 500.00

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

Mailing Address 7320 Shelborne Dr.

City Granite Bay State CA Zip Code 95746

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

Name of Employer Emergency Neurosurgery Services, Inc Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2014

Transaction ID : SA11AI.4533

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 151-21 23 Avenue

City Whitestone State NY Zip Code 11357

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

Name of Employer Baker Hostetler Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2014

Transaction ID : SA11AI.4576

Amount of Each Receipt this Period
 250.00

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 58
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Van Hipp, Jr.

Mailing Address 809 N. Quaker Ln.

City	State	Zip Code
Alexandria	VA	22302

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

Name of Employer	Occupation
American Defense International	Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4535

Amount of Each Receipt this Period

1000.00

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

Mailing Address PO BOX 1629

City	State	Zip Code
Titusville	FL	32781

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

Name of Employer	Occupation
Trident Group	Director of MAROPS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4537

Amount of Each Receipt this Period

1000.00

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

Mailing Address PO BOX 1629

City	State	Zip Code
Titusville	FL	32781

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

Name of Employer	Occupation
Trident Group	Director of MAROPS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4538

Amount of Each Receipt this Period

1000.00

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 8 OF 58
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
peter kakoyiannis

Mailing Address 1413 silo road

City yardley State PA Zip Code 19067

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

Name of Employer ELLK Occupation attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : SA11AI.4577

Amount of Each Receipt this Period
250.00

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

Mailing Address 1420 Spring Hill Road, Suite 600

City Mclean State VA Zip Code 22102

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

Name of Employer Kalis Development Corporation Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period
250.00

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

Mailing Address One South Limestone Street Suite 1

City Springfield State OH Zip Code 45502

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

Name of Employer James Lagos, ESQ. Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.4531

Amount of Each Receipt this Period
2500.00

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 9 OF 58
	<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)
Friends of George Demos

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

Mailing Address 6554 Greyledge Court

City Alexandria State VA Zip Code 22310

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

Name of Employer American Hellenic Institute Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4581

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dana Lee Tavlardes

Mailing Address 727 Sapphire St Apt 207

City San Diego State CA Zip Code 92107

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

Name of Employer Willis Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4540

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 7 Rosemont Ct

City N Bethesda State MD Zip Code 20852

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

Name of Employer Deoudes - Magafan Realty, Inc. Occupation Commercial Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4560

Amount of Each Receipt this Period
 500.00

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 10 OF 58
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Mike Manatos

Mailing Address 8532 W Howell Road

City: Bethesda State: MD Zip Code: 20817

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

Name of Employer: Manatos and Manatos Occupation: Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 24 / 2014

Transaction ID : SA11AI.4583

Amount of Each Receipt this Period: 250.00

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

Mailing Address 8532 W Howell Road

City: Bethesda State: MD Zip Code: 20817

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

Name of Employer: Manatos and Manatos Occupation: Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 24 / 2014

Transaction ID : SA11AI.4584

Amount of Each Receipt this Period: 250.00

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

Mailing Address 11371 Iager BLVD Unite 2

City: Fulton State: MD Zip Code: 20759

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

Name of Employer: Lockheed Martin Occupation: Process Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 24 / 2014

Transaction ID : SA11AI.4586

Amount of Each Receipt this Period: 250.00

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

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

750.00

**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 58
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
SPIROS MILONAS

Mailing Address 171 WEST 57TH STREET, APT. 11C

City NEW YORK	State NY	Zip Code 10019
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FEC ID number of contributing federal political committee. **C**

Name of Employer IONIAN MANAGEMENT INC.	Occupation EXECUTIVE
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.4562

Amount of Each Receipt this Period
500.00

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

Mailing Address 120 Spoonbill Rd.

City Manalapan	State FL	Zip Code 33462
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Retired
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : SA11AI.4588

Amount of Each Receipt this Period
250.00

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

Mailing Address 5402 Parkview Drive

City Haverford	State PA	Zip Code 19041
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.4527

Amount of Each Receipt this Period
2600.00

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

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

3350.00

**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 58
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Gregory Papadeas

Mailing Address 6921 E. Powers Ave.

City Grenwood Village	State CO	Zip Code 80111
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FEC ID number of contributing federal political committee. **C**

Name of Employer Physician	Occupation Advanced Dermatology
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.4590

Amount of Each Receipt this Period
250.00

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

Mailing Address 1401 Okie Street NE

City Washington	State DC	Zip Code 20002
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pappas and Sons	Occupation Executive
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4592

Amount of Each Receipt this Period
250.00

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

Mailing Address 700 Fairway Dr. N.E.

City Warren	State OH	Zip Code 44483
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FEC ID number of contributing federal political committee. **C**

Name of Employer Chairman of the Board	Occupation AVI Food Systems, Inc.
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.4542

Amount of Each Receipt this Period
1000.00

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 13 OF 58
	<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)
Friends of George Demos

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

Mailing Address 4018 Brandywine Street NW

City Washington State DC Zip Code 20016

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

Name of Employer Circle Companies Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4566

Amount of Each Receipt this Period
 500.00

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

Mailing Address 4018 Brandywine Street NW

City Washington State DC Zip Code 20016

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

Name of Employer Circle Companies Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4564

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1336 Kirby Road

City Mclean State VA Zip Code 22101

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

Name of Employer Circle Companies Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4544

Amount of Each Receipt this Period
 1000.00

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 14 OF 58
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Gus Perdikakis		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 04 / 2014
Mailing Address 8306 Sunfish Lane		Transaction ID : SA11AI.4594
City Maineville	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Gus Perdikakis Associates Inc.	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Michael Plakogiannis		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 05 / 2014
Mailing Address 415 E 37th Street Apt 11E		Transaction ID : SA11AI.4529
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer ACP	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) C. Rodoula Plakogiannis		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 01 / 2014
Mailing Address 404 East 79th St.		Transaction ID : SA11AI.4546
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer LIU	Occupation Physician/Professor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 58
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
John Polis

Mailing Address 3286 M ST NW #300

City Washington State DC Zip Code 20007

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4548

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 3286 M ST NW #300

City Washington State DC Zip Code 20007

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4549

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 3666 Upton Street

City Washington State DC Zip Code 20008

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4567

Amount of Each Receipt this Period
 500.00

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 16 OF 58
	<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)
Friends of George Demos

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

Mailing Address 2912 Olive St

City Washington State DC Zip Code 20007

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

Name of Employer Capitol Outdoor Occupation Media

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 21 / 2014

Transaction ID : SA11AI.4550

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2912 Olive St

City Washington State DC Zip Code 20007

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

Name of Employer Capitol Outdoor Occupation Media

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.4551

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2912 Olive St

City Washington State DC Zip Code 20007

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

Name of Employer Capitol Outdoor Occupation Media

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11AI.4554

Amount of Each Receipt this Period
600.00

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

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

2600.00

**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 58
	<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)
Friends of George Demos

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

Mailing Address 2912 Olive St

City Washington State DC Zip Code 20007

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

Name of Employer Capitol Outdoor Occupation Media

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.4572

Amount of Each Receipt this Period
400.00

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

Mailing Address 2722 Coleman Way

City Sacramento State CA Zip Code 95818

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

Name of Employer Attorney Occupation Thomas Law Group

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.4569

Amount of Each Receipt this Period
500.00

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

Mailing Address 5497 Clonmel Ct

City Alexandria State VA Zip Code 22315

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

Name of Employer Arent Fox LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4596

Amount of Each Receipt this Period
250.00

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

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

1150.00

**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 18 OF 58
	<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)
Friends of George Demos

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

Mailing Address 520 Sugartown Road

City State Zip Code
Devon PA 19333

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

Name of Employer Occupation
Drexel University Dean Emeritus

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4598

Amount of Each Receipt this Period
250.00

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

Mailing Address 2021 Oyster Harbors

City State Zip Code
Osterville MA 02655

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

Name of Employer Occupation
JPA Management LLC Real Estate Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : SA11AI.4571

Amount of Each Receipt this Period
500.00

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

Mailing Address 7450 Old Maple Square

City State Zip Code
Mclean VA 22102

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

Name of Employer Occupation
Stephen Yeonas Co Chairman of the Board

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : SA11AI.4553

Amount of Each Receipt this Period
1000.00

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

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

1750.00

30700.00

**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 19 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial)
A. 74 State Hotel

Mailing Address 74 State Street

City Albany State NY Zip Code 12207

Purpose of Disbursement
Hotel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 26 / 2014

Amount of Each Disbursement this Period
122.30

Transaction ID : SB17.4762

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

Mailing Address 16 N Astor Street

City Irvington State NY Zip Code 10533

Purpose of Disbursement
Polling

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 16 / 2014

Amount of Each Disbursement this Period
8841.77

Transaction ID : SB17.4764

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

Mailing Address 16 N Astor Street

City Irvington State NY Zip Code 10533

Purpose of Disbursement
Polling

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 03 / 2014

Amount of Each Disbursement this Period
14254.77

Transaction ID : SB17.4765

SUBTOTAL of Disbursements This Page (optional)..... 23218.84

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 58	
	<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)
Friends of George Demos

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

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Train tickets

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 20 / 2014

Amount of Each Disbursement this Period: 42.00

Transaction ID : SB17.4767

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

Mailing Address 522 lefferts avenue brooklyn

City Brooklyn State NY Zip Code 11225

Purpose of Disbursement Research Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 21 / 2014

Amount of Each Disbursement this Period: 12000.00

Transaction ID : SB17.4769

Full Name (Last, First, Middle Initial)
c. Bay Harbour Insurance Agency, Inc

Mailing Address 88 Waverly Ave

City Patchogue State NY Zip Code 11772

Purpose of Disbursement Office Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 06 / 2014

Amount of Each Disbursement this Period: 978.50

Transaction ID : SB17.4771

SUBTOTAL of Disbursements This Page (optional) 13020.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Cablevision

Mailing Address P.O. Box 371378

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement TV Phone and Internet

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 05 / 2014

Amount of Each Disbursement this Period: 194.12

Transaction ID : SB17.4773

Full Name (Last, First, Middle Initial)

B. Chase

Mailing Address 2001 Nesconset Hwy

City Lake Grove State NY Zip Code 11755

Purpose of Disbursement Wire Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 09 / 2014

Amount of Each Disbursement this Period: 25.00

Transaction ID : SB17.4775

Full Name (Last, First, Middle Initial)

c. Chase

Mailing Address 2001 Nesconset Hwy

City Lake Grove State NY Zip Code 11755

Purpose of Disbursement Wire Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 23 / 2014

Amount of Each Disbursement this Period: 25.00

Transaction ID : SB17.4776

SUBTOTAL of Disbursements This Page (optional) 244.12

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 58	
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4777
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4778
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chase		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4779
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4780
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4781
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chase		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 2008 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4783
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4784
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4785
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chase		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4786
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4787
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4788
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chase		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4789
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4790
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 2001 Nesconset Hwy		Amount of Each Disbursement this Period 25.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Wire Fee	Transaction ID : SB17.4791
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Committee to Elect a Republican Majority		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address PO BOX 7		Amount of Each Disbursement this Period 225.00
City Brookhaven	State NY	
Zip Code 11719	Purpose of Disbursement Non Federal contribution	Transaction ID : SB17.4795
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 58	
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 140 Comac Street		Amount of Each Disbursement this Period 919.25 Transaction ID : SB17.4797
City Ronkonkoma State NY Zip Code 11779	Purpose of Disbursement Postage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Friends of Kevin LaValle		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO BOX 56		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4799
City Centereach State NY Zip Code 11720	Purpose of Disbursement Non Federal contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FRIENDS OF ROB ASTORINO		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO BOX 100		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4801
City South Salem State NY Zip Code 10590	Purpose of Disbursement Non Federal contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	919.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 58	
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Fusion Management System		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 95 Route 17 South		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4803
City Paramus State NJ Zip Code 06752	Purpose of Disbursement Internet Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hess		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 2825 Middle Country Rd		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.4805
City Lake Grove State NY Zip Code 11755	Purpose of Disbursement Gas	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 40000.00 Transaction ID : SB17.4806
City Niskayuna State NY Zip Code 12309	Purpose of Disbursement Political Management Consulting Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	43020.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 40396.00
City Niskayuna	State NY Zip Code 12309	
Purpose of Disbursement Media Buy	Category/Type	Transaction ID : SB17.4812
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 55801.20
City Niskayuna	State NY Zip Code 12309	
Purpose of Disbursement Media Buy	Category/Type	Transaction ID : SB17.4813
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 23101.05
City Niskayuna	State NY Zip Code 12309	
Purpose of Disbursement Media Buy	Category/Type	Transaction ID : SB17.4814
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	119298.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. In The Field Consulting		Date of Disbursement MM / DD / YYYY 02 / 05 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 24097.50
City Niskayuna	State NY Zip Code 12309	
Purpose of Disbursement Media Buy	Candidate Name	Transaction ID : SB17.4807
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. In The Field Consulting		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 24501.05
City Niskayuna	State NY Zip Code 12309	
Purpose of Disbursement Media Buy	Candidate Name	Transaction ID : SB17.4808
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. In The Field Consulting		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 52625.00
City Niskayuna	State NY Zip Code 12309	
Purpose of Disbursement Media Buy	Candidate Name	Transaction ID : SB17.4809
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	101223.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 58	
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 135850.00
City Niskayuna State NY Zip Code 12309	Purpose of Disbursement Media Buy	
Candidate Name		Transaction ID : SB17.4810
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 47603.00
City Niskayuna State NY Zip Code 12309	Purpose of Disbursement Media Buy	
Candidate Name		Transaction ID : SB17.4811
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 20858.00
City Niskayuna State NY Zip Code 12309	Purpose of Disbursement Media Buy	
Candidate Name		Transaction ID : SB17.4815
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	204311.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 58	
	<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)
Friends of George Demos

A. In The Field Consulting

Full Name (Last, First, Middle Initial)
Mailing Address 1520 Myron Street

City Niskayuna State NY Zip Code 12309

Purpose of Disbursement Media Buy

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 19 / 2014

Amount of Each Disbursement this Period: 131650.00

Transaction ID : SB17.4816

B. Islip Town Conservative Executive Committee

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 257

City Islip Terrace State NY Zip Code 11752

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 31 / 2014

Amount of Each Disbursement this Period: 250.00

Transaction ID : SB17.4818

c. Labels and Lists

Full Name (Last, First, Middle Initial)
Mailing Address 2500 116th Avenue NE

City Bellevue State WA Zip Code 98004

Purpose of Disbursement Voter Lists

Candidate Name Friends of George Demos

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement: 03 / 31 / 2014

Amount of Each Disbursement this Period: 1643.48

Transaction ID : SB17.4917

SUBTOTAL of Disbursements This Page (optional) 133543.48

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Lake Grove Plaza, LLC		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address PO Box 372		Amount of Each Disbursement this Period 12052.00 Transaction ID : SB17.4825
City Saint James	State NY	
Zip Code 11780	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Lake Grove Plaza, LLC		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address PO Box 372		Amount of Each Disbursement this Period 2066.00 Transaction ID : SB17.4826
City Saint James	State NY	
Zip Code 11780	Purpose of Disbursement Office Security Deposit	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Lowe's		Date of Disbursement MM / DD / YYYY 02 / 26 / 2014
Mailing Address 2150 Nesconset Highway		Amount of Each Disbursement this Period 112.37 Transaction ID : SB17.4833
City Stony Brook	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	14230.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 58	
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Tania Marnier		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 303 East 83rd Street		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4890
City New York State NY Zip Code 10028	Purpose of Disbursement Photography	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. National Herald		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 37-10 30th Street		Amount of Each Disbursement this Period 1107.00 Transaction ID : SB17.4838
City Long Island City State NY Zip Code 11101	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. P.C. Richard and Son		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014
Mailing Address 2229 Route 347		Amount of Each Disbursement this Period 460.48 Transaction ID : SB17.4840
City Stony Brook State NY Zip Code 11790	Purpose of Disbursement Office supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1917.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4842
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4843
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 117.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4844
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	164.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4845
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4846
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4847
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	58.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4848
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4849
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 117.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4850
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	141.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.4851
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.4852
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.4853
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	49.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.25 Transaction ID : SB17.4854
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 29.00 Transaction ID : SB17.4861
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.25 Transaction ID : SB17.4855
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	51.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.4856
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.4857
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 22.50 Transaction ID : SB17.4858
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	112.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.55
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4859
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.4860
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PSEG		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 460 E. Main Street		Amount of Each Disbursement this Period 490.00
City Patchogue	State NY	
Zip Code 11772	Purpose of Disbursement Electric Payment	Transaction ID : SB17.4863
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	521.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 58	
	<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)
Friends of George Demos

A. Public Service Electric and Gas Company

Full Name (Last, First, Middle Initial)
Mailing Address 250 Willis Avenue

City Roslyn Heights State NY Zip Code 11577

Purpose of Disbursement Electricity

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 25 / 2014

Amount of Each Disbursement this Period: 490.00

Transaction ID : SB17.4865

B. SCM Associates

Full Name (Last, First, Middle Initial)
Mailing Address 1283 Main Street

City Dublin State NH Zip Code 03444

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 09 / 2014

Amount of Each Disbursement this Period: 7654.84

Transaction ID : SB17.4867

c. Chris Shannon

Full Name (Last, First, Middle Initial)
Mailing Address 1 Naro Lane

City Northport State NY Zip Code 11768

Purpose of Disbursement Petition Assistant

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 06 / 2014

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.4793

SUBTOTAL of Disbursements This Page (optional) 11144.84

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 2702 Love Field Drive		Amount of Each Disbursement this Period 418.00
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Plane tickets	Transaction ID : SB17.4869
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 613.30
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4871
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 38.98
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4872
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1070.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 29.29
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4873
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 13.52
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4874
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 20.04
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4875
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	62.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 58	
	<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)
Friends of George Demos

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

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 04 / 2014

Amount of Each Disbursement this Period: 14.09

Transaction ID : SB17.4876

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

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 07 / 2014

Amount of Each Disbursement this Period: 120.04

Transaction ID : SB17.4877

Full Name (Last, First, Middle Initial)
c. Staples

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies/stamps

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 16 / 2014

Amount of Each Disbursement this Period: 510.18

Transaction ID : SB17.4878

SUBTOTAL of Disbursements This Page (optional) 644.31

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 58		
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address 1901 L Street NW		Amount of Each Disbursement this Period 12.74
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Office supplies	Transaction ID : SB17.4880
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 61.22
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4881
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 13.35
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4882
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	87.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 58		
	<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)
Friends of George Demos

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

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 30 / 2014

Amount of Each Disbursement this Period: 41.27

Transaction ID : SB17.4883

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

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies/stamps

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 31 / 2014

Amount of Each Disbursement this Period: 499.12

Transaction ID : SB17.4884

Full Name (Last, First, Middle Initial)
c. Sticky IT

Mailing Address 3600 South College Road

City Wilmington State NC Zip Code 28412

Purpose of Disbursement Website Maintainence

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 10 / 2014

Amount of Each Disbursement this Period: 240.00

Transaction ID : SB17.4886

SUBTOTAL of Disbursements This Page (optional) 780.39

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 58	
	<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)
Friends of George Demos

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

Mailing Address 1150 Portion Road Suite 2 Holtsvil

City Holtsville State NY Zip Code 11742

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 07 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.4888

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

Mailing Address 18 Pendleton Court

City Medford State NJ Zip Code 08055

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 23 / 2014

Amount of Each Disbursement this Period: 13184.54

Transaction ID : SB17.4892

Full Name (Last, First, Middle Initial)
c. Traz Group

Mailing Address 18 Pendleton Court

City Medford State NJ Zip Code 08055

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 30 / 2014

Amount of Each Disbursement this Period: 14327.65

Transaction ID : SB17.4893

SUBTOTAL of Disbursements This Page (optional) 28012.19

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Traz Group		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11405.26 Transaction ID : SB17.4894
City Medford State NJ Zip Code 08055	Purpose of Disbursement Direct Mail	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Traz Group		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 13180.27 Transaction ID : SB17.4895
City Medford State NJ Zip Code 08055	Purpose of Disbursement Direct Mail	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Traz Group		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11343.51 Transaction ID : SB17.4896
City Medford State NJ Zip Code 08055	Purpose of Disbursement Direct Mail	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35929.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Traz Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 12119.73 Transaction ID : SB17.4897
City Medford State NJ Zip Code 08055	Purpose of Disbursement Direct Mail	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Traz Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.4898
City Medford State NJ Zip Code 08055	Purpose of Disbursement Direct Mail	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Traz Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.4899
City Medford State NJ Zip Code 08055	Purpose of Disbursement Direct Mail	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35006.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 58	
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Kevin Tschirhart		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 3 drake place		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.4819
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Campaign Management Consulting		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kevin Tschirhart		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 3 drake place		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.4820
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Campaign Management Consulting		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Kevin Tschirhart		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 3 drake place		Amount of Each Disbursement this Period 232.55 Transaction ID : SB17.4821
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Reimbursement - office supplies		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14232.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 58	
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Kevin Tschirhart		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 3 drake place		Amount of Each Disbursement this Period 9345.26 Transaction ID : SB17.4822
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Campaign Management Consulting/ reimbursement for office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kevin Tschirhart		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 3 drake place		Amount of Each Disbursement this Period 1127.43 Transaction ID : SB17.4823
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Reimbursement - office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. UPS Store		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014
Mailing Address 100 Nicolls Road S.		Amount of Each Disbursement this Period 56.49 Transaction ID : SB17.4901
City Stony Brook	State NY Zip Code 11794	
Purpose of Disbursement Office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10529.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 11 W. Rio Salado Parkway		Amount of Each Disbursement this Period 402.00
City Tempe	State AZ	
Zip Code 85281	Purpose of Disbursement Plane tickets	Transaction ID : SB17.4903
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014
Mailing Address 1001 Hawkins Avenue		Amount of Each Disbursement this Period 245.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Stamps	Transaction ID : SB17.4828
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 1001 Hawkins Avenue		Amount of Each Disbursement this Period 98.00
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Stamps	Transaction ID : SB17.4829
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	745.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 1001 Hawkins Avenue		Amount of Each Disbursement this Period 16.95 Transaction ID : SB17.4830
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 1001 Hawkins Avenue		Amount of Each Disbursement this Period 98.00 Transaction ID : SB17.4831
City Lake Grove	State NY	
Zip Code 11755	Purpose of Disbursement Stamps	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Matt Varvaro		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 80 Soundview Drive		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4836
City Port Washington	State NY	
Zip Code 11050	Purpose of Disbursement Research Assistant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3114.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 58	
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Matt Varvaro		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 80 Soundview Drive		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4835
City Port Washington	State NY	
Zip Code 11050	Purpose of Disbursement Research Assistant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. William Ware and Associates		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 311 East 72nd Street		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.4905
City New York	State NY	
Zip Code 10021	Purpose of Disbursement Petition Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. William Ware and Associates		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 311 East 72nd Street		Amount of Each Disbursement this Period 2909.25 Transaction ID : SB17.4906
City New York	State NY	
Zip Code 10021	Purpose of Disbursement Tele Town Hall and Robo Call consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10909.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 58			
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. William Ware and Associates		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 311 East 72nd Street		Amount of Each Disbursement this Period 5000.00
City New York	State NY	
Zip Code 10021	Purpose of Disbursement Petition Consulting	Transaction ID : SB17.4907
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Women's National Republican Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 3 West 51st Street		Amount of Each Disbursement this Period 1796.44
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Event payment	Transaction ID : SB17.4909
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	6796.44
TOTAL This Period (last page this line number only).....	815686.22

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4100
Friends of George Demos

LOAN SOURCE Full Name (Last, First, Middle Initial) George G Demos	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 378		
City Ronkonkoma	State NY	ZIP Code 11779

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000000.00	0.00	1000000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 27 / Y 2013 Y	M M / D D / Y none Y Y	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"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="1000000.00"/>
TOTALS 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)

Transaction ID : SC/10.4495

Friends of George Demos

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

George G Demos

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 378

City State ZIP Code
Ronkonkoma NY 11779

Original Amount of Loan 1000000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000000.00
---------------------------------------	------------------------------------	---

TERMS

Date Incurred: M 12 / D 30 / Y 2013
Date Due: M / D / Y none
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).....	▶	1000000.00
TOTALS This Period (last page in this line only).....	▶	2000000.00

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