

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Friends of Maurice Hinchey

ADDRESS (number and street) PO Box 4497

Check if different than previously reported. (ACC)

Kingston NY 12402

2. **FEC IDENTIFICATION NUMBER** C00272633

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

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

Kingston NY 12402 NY 22

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on _____ in the State of _____

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

General (30G) Runoff (30R) Special (30S)

Election on _____ in the State of _____

5. Covering Period 04 01 2008 through 06 30 2008

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 Susanne Herl

Signature of Treasurer Electronically Filed by Susanne Herl Date 07 15 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Maurice Hinchey

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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)).....	107624.00	477202.64
(b) Total Contribution Refunds (from Line 20(d)).....	1300.00	1300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	106324.00	475902.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	48210.38	284332.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	8.00	413.99
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48202.38	283918.45
8. Cash on Hand at Close of Reporting Period (from Line 27).....	183432.86	
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).....	0.00	

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 Maurice Hinchey

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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).....

51555.00

199785.64

(ii) Unitemized.....

17834.00

101422.00

(iii) TOTAL of contributions

69389.00

301207.64

from individuals..... ▶

0.00

250.00

(b) Political Party Committees.....

38235.00

175745.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

107624.00

477202.64

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

8.00

413.99

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

210.63

1187.02

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

107842.63

478803.65

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48210.38	284332.44
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	71600.00
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).....	1300.00	1300.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1300.00	1300.00
21. OTHER DISBURSEMENTS.....	11062.00	48341.40
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	60572.38	405573.84

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	136162.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	107842.63
25. SUBTOTAL (add Line 23 and Line 24).....	244005.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60572.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	183432.86

**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 / 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 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 Maurice Hinchey

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

Mailing Address 1001 Taughannock Boulevard

City Ithaca State NY Zip Code 14850-9572

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 06 / 27 / 2008

Transaction ID: C31829

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Edward A Ames

Mailing Address 2 Spaulding Lane

City Riverdale State NY Zip Code 10471

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

Name of Employer Self Occupation Trustee

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 28 / 2008

Transaction ID: C31564

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Arthur A Anderson

Mailing Address 302 Moonhaw Road

City West Shokan State NY Zip Code 12494

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

Name of Employer Morgan Anderson Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 06 / 04 / 2008

Transaction ID: C31629

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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: PAGE 6 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Arthur A Anderson

Mailing Address 302 Moonhaw Road

City State Zip Code
West Shokan NY 12494

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Morgan Anderson Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	8

Transaction ID: C31832

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 8 Library Lane

City State Zip Code
Woodstock NY 12498

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Not Employed Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	8

Transaction ID: C31708

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Patricia Balis

Mailing Address 324 Hommelville Rd.

City State Zip Code
Saugerties NY 12477

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Not Employed Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	0	8

Transaction ID: C31650

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 94
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Bruce Becker

Mailing Address PO Box 5250

City Binghamton State NY Zip Code 13902

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

Name of Employer Self Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 06 / 30 / 2008

Transaction ID: C31852

Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Sandra H Blair

Mailing Address 50 Chestnut Street

City Rhinebeck State NY Zip Code 12572

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

Name of Employer Not Employed Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt: 06 / 04 / 2008

Transaction ID: C31662

Amount of Each Receipt this Period: 400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Judith Bleakley O'Neill

Mailing Address 504 Applewood Circle

City Poughkeepsie State NY Zip Code 12601

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

Name of Employer Dutchess County Occupation Legislator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 06 / 10 / 2008

Transaction ID: C31735

Amount of Each Receipt this Period: 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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: PAGE 8 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) Stephen Bloom</p> <p>Mailing Address 157 Westview Lane</p> <p>City State Zip Code Ithaca NY 14850</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cornell University Professor</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt 06 / 04 / 2008</p> <p>Transaction ID: C31652</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Linda Bodner</p> <p>Mailing Address PO Box 469</p> <p>City State Zip Code Bearsville NY 12409</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Attorney</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 06 / 04 / 2008</p> <p>Transaction ID: C31630</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Vincent Bradley, Jr.</p> <p>Mailing Address 215 North Manor Avenue</p> <p>City State Zip Code Kingston NY 12401</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Attorney</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 700.00</p>	<p>Date of Receipt 04 / 17 / 2008</p> <p>Transaction ID: C31544</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	450.00
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 9 / 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Vincent Bradley, Jr.		Date of Receipt
	Mailing Address 215 North Manor Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 14 / 2008
	City	State	Zip Code
	Kingston	NY	12401
	FEC ID number of contributing federal political committee. C		Transaction ID: C31787
Name of Employer Self		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Eugene W Burns		Date of Receipt
	Mailing Address 2440 Rhonda Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 04 / 2008
	City	State	Zip Code
	Vestal	NY	13850
	FEC ID number of contributing federal political committee. C		Transaction ID: C31622
Name of Employer Mutual Wholesale Services		Occupation Owner	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 200.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Anne Cabot		Date of Receipt
	Mailing Address PO Box 222		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 06 / 2008
	City	State	Zip Code
	Cold Spring	NY	10516
	FEC ID number of contributing federal political committee. C		Transaction ID: C31591
Name of Employer Not Employed		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Kylie L Capelli

Mailing Address 550 Park Avenue

City State Zip Code
New York NY 10065

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

Name of Employer Not Employed Occupation
Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
200.00

Transaction ID: C31575

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Kylie L Capelli

Mailing Address 550 Park Avenue

City State Zip Code
New York NY 10065

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

Name of Employer Not Employed Occupation
Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
2300.00

Transaction ID: C31574

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Frank Cardinale

Mailing Address 70 Lipton Street

City State Zip Code
Kingston NY 12401

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

Name of Employer Incentives Management Group LLC Occupation
Partner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
225.00

Transaction ID: C31545

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2725.00**

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: PAGE 11 / 94
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Kathleen Carey-Mihm

Mailing Address 500 Washington Ave #12H

City State Zip Code
Kingston NY 12401

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

Name of Employer Occupation
Ulster County Clerk

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2008

Transaction ID: C31524

Amount of Each Receipt this Period
75.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Kathleen Carey-Mihm

Mailing Address 500 Washington Ave #12H

City State Zip Code
Kingston NY 12401

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

Name of Employer Occupation
Ulster County Clerk

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: C31640

Amount of Each Receipt this Period
125.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Caryn Carter

Mailing Address 427 Upper Samsonville Road

City State Zip Code
Olivebridge NY 12461

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

Name of Employer Occupation
Mercury Group Public Relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: C31710

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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: PAGE 12 / 94
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Julie Anne Case

Mailing Address P.O. Box 1072

City State Zip Code
Woodstock NY 12498

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

Name of Employer Self Occupation Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
MM / DD / YYYY
06 / 18 / 2008

Transaction ID: C31762

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Sandra Cassese

Mailing Address 19 Birch Lane

City State Zip Code
Woodstock NY 12498

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

Name of Employer Vassar Brothers Medical Center Occupation Administrative Nurse

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: C31660

Amount of Each Receipt this Period
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Raoul Castaneda

Mailing Address 115 Araca Road

City State Zip Code
Babylon NY 11702

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

Name of Employer Town of Babylon Occupation Deputy Commissioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2008

Transaction ID: C31789

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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: PAGE 13 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Riaz Chaudhry

Mailing Address 12 Anchor Drive

City State Zip Code
Newburgh NY 12550

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

Name of Employer Self Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 3 / 2 0 0 8

Transaction ID: C31770

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Roslyn H Chernesky

Mailing Address 35 West 92nd Street

City State Zip Code
New York NY 10025

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

Name of Employer Fordham University Occupation Educator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 8

Transaction ID: C31839

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Arthur C Cohen

Mailing Address PO Box 252

City State Zip Code
Bearsville NY 12409

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

Name of Employer Self Occupation Real Estate Appraiser

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 4 / 2 0 0 8

Transaction ID: C31631

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Clare Coleman

Mailing Address PO Box 118

City Rhinecliff State NY Zip Code 12574

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

Name of Employer Planned Parenthood MHV Occupation Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 05 / 21 / 2008
Transaction ID: C31603
 Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ruth Covelli

Mailing Address 163 Krager Road

City Binghamton State NY Zip Code 13904

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 08 / 2008
Transaction ID: C31687
 Amount of Each Receipt this Period 150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Joan K Davidson

Mailing Address 760 Woods Road

City Germantown State NY Zip Code 12526

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.00

Date of Receipt 06 / 18 / 2008
Transaction ID: C31782
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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: PAGE 15 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Boker Doyle

Mailing Address 131 East 81st Street

City State Zip Code
New York NY 10028

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Date of Receipt: 04 / 28 / 2008
Transaction ID: C31563

B. Full Name (Last, First, Middle Initial)
Philip I Dropkin

Mailing Address 36 Gregory Drive

City State Zip Code
Goshen NY 10924

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

Name of Employer Granite Associates Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Date of Receipt: 04 / 11 / 2008
Transaction ID: C31498

C. Full Name (Last, First, Middle Initial)
Steve Dubrovsky

Mailing Address PO Box 151

City State Zip Code
Bethel NY 12720

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

Name of Employer Woodstone Companies Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 2200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Date of Receipt: 04 / 17 / 2008
Transaction ID: C31531

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 16 / 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Jeanne Eisenstadt		Date of Receipt MM / DD / YYYY 05 / 06 / 2008
	Mailing Address 2003 Leila Drive		Transaction ID: C31592
	City Loveland	State CO	Zip Code 80538-3627
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Not Employed	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) Paul Eisland		Date of Receipt MM / DD / YYYY 06 / 14 / 2008
	Mailing Address 26 Stoney Clove Lane		Transaction ID: C31783
	City Chichester	State NY	Zip Code 12416
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Esopus Foundation	Occupation Executive	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Samuel Eskenazi		Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address 750 Columbus Avenue		Transaction ID: C31588
	City New York	State NY	Zip Code 10025
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Not Employed	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1750.00		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 94
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Samuel Eskenazi

Mailing Address 750 Columbus Avenue

City State Zip Code
New York NY 10025

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2008

Transaction ID: C31842

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Betty Feher

Mailing Address 916 Prescott Avenue

City State Zip Code
Endicott NY 13760

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

Name of Employer Not Employed Occupation Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2008

Transaction ID: C31617

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lester Fensterheim

Mailing Address 189 High Street

City State Zip Code
Phoenicia NY 12464

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

Name of Employer Self Occupation Marketing Research Analyst

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2008

Transaction ID: C31632

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 850.00

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: PAGE 18 / 94
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial) Richard J Friedland		Date of Receipt MM / DD / YYYY 06 / 04 / 2008
Mailing Address 57 Kingwood Drive		Transaction ID: C31664
City Poughkeepsie	State NY	Zip Code 12601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Vassar Brothers Medical Center	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Ross Frommer		Date of Receipt MM / DD / YYYY 04 / 17 / 2008
Mailing Address 2500 Johnson Avenue #1R		Transaction ID: C31532
City Bronx	State NY	Zip Code 10463
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Columbia University	Occupation Professor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Walter F Garigiano		Date of Receipt MM / DD / YYYY 04 / 28 / 2008
Mailing Address 161 Varga Road		Transaction ID: C31565
City Grahamsville	State NY	Zip Code 12740
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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)	1150.00
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: PAGE 19 / 94
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) Edward Gersh</p> <p>Mailing Address 21 Sweet Hollow Road</p> <p>City State Zip Code Huntington NY 11743</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Not Employed Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2300.00</p>	<p>Date of Receipt 04 / 28 / 2008</p> <p>Transaction ID: C31566</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Edward Gersh</p> <p>Mailing Address 21 Sweet Hollow Road</p> <p>City State Zip Code Huntington NY 11743</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Not Employed Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2300.00</p>	<p>Date of Receipt 06 / 14 / 2008</p> <p>Transaction ID: C31760</p> <p>Amount of Each Receipt this Period 1800.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* In-Kind: Catering</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Holli Gersh</p> <p>Mailing Address 21 Sweet Hollow Road</p> <p>City State Zip Code Huntington NY 11743</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Artist</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1750.00</p>	<p>Date of Receipt 06 / 14 / 2008</p> <p>Transaction ID: C31761</p> <p>Amount of Each Receipt this Period 1750.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* In-Kind: Catering</p>
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SUBTOTAL of Receipts This Page (optional)	4050.00
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: PAGE 20 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Alan Ginsberg

Mailing Address PO Box 766

City State Zip Code
Lake Katrine NY 12449-0766

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

Name of Employer Occupation
Tech City Chairman

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 8

Transaction ID: C31567

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ben Giordano

Mailing Address 40 Crowley Road

City State Zip Code
Roscoe NY 12776

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

Name of Employer Occupation
Not Employed Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 8

Transaction ID: C31568

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jeffrey W Giordano

Mailing Address 58 Good Hill Road

City State Zip Code
Weston CT 06887

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

Name of Employer Occupation
IR Holdings LLC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 8

Transaction ID: C31569

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Seth M Glickenhau

Mailing Address 100 Dorchester Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Glickenhau & Co. Senior Partner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 28 / 2008

Transaction ID: C31570

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Seth M Glickenhau

Mailing Address 100 Dorchester Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Glickenhau & Co. Senior Partner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: C31594

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Cynthia Goldberg

Mailing Address 496 John Joy Road

City State Zip Code
Woodstock NY 12498

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

Name of Employer Occupation
Self Actress

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 18 / 2008

Transaction ID: C31784

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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: PAGE 22 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Eric Goldman

Mailing Address 1325 Avenue of the Americas
28th Floor

City State Zip Code
New York NY 10019

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

Name of Employer Self Occupation
Investment Manager

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: C31709

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 65 Ackerley Road

City State Zip Code
Grahamsville NY 12740

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

Name of Employer Not Employed Occupation
Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: C31843

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michelle Hershman-Tuchman

Mailing Address 1258 Church Road

City State Zip Code
Saugerties NY 12477

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

Name of Employer Self Occupation
Proprietor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: C31647

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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: PAGE 23 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Vivienne J Hodges

Mailing Address 146 Witchtree Road

City State Zip Code
Woodstock NY 12498

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

Name of Employer Self Occupation
Writer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2008

Transaction ID: C31641

Amount of Each Receipt this Period
312.50

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jane Hsu

Mailing Address 2312 Hemlock Lane

City State Zip Code
Vestal NY 13850

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

Name of Employer Cornell University Occupation
Lab Technician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 18 / 2008

Transaction ID: C31765

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ettore F Infante

Mailing Address PO Box 216

City State Zip Code
Phoenicia NY 12464

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

Name of Employer Not Employed Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2008

Transaction ID: C31834

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1012.50**

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: PAGE 24 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Charles Johnston
Mailing Address Box 717
City Roscoe State NY Zip Code 12776
FEC ID number of contributing federal political committee. **C**
Name of Employer Johnston Forest Prod Inc Occupation Executive
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 04 / 11 / 2008
Transaction ID: C31499
Amount of Each Receipt this Period 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Matthew Kambrod
Mailing Address 915 Oyster Cove Drive
City Grasonville State MD Zip Code 21638
FEC ID number of contributing federal political committee. **C**
Name of Employer Link Simulation Occupation Lobbyist
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 06 / 27 / 2008
Transaction ID: C31818
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Maryann I Katz
Mailing Address 33 Hornbeck Ridge
City Poughkeepsie State NY Zip Code 12603
FEC ID number of contributing federal political committee. **C**
Name of Employer Not Employed Occupation Homemaker
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 06 / 10 / 2008
Transaction ID: C31737
Amount of Each Receipt this Period 400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 94
(check only one)

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

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 Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Maureen A Keegan

Mailing Address 55 River Road

City State Zip Code
Ulster Park NY 12487

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

Name of Employer Self Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: C31634

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Steven L Kelley

Mailing Address Ellenville Regional Hospital
PO Box 668

City State Zip Code
Ellenville NY 12428

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

Name of Employer Ellenville Regional Hospital Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 18 / 2008

Transaction ID: C31768

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Lewis Klugman

Mailing Address 8 Old Lily Pond Road

City State Zip Code
Parkville NY 12768

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

Name of Employer Klugman Associates Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2008

Transaction ID: C31500

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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: PAGE 26 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Rose Koplovitz

Mailing Address 16 Oriole Drive

City State Zip Code
Woodstock NY 12498

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Westwood Metes & Bounds Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	4	/	2	0	0	8

Transaction ID: C31636

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Victor Kovner

Mailing Address 27 West 67th Street

City State Zip Code
New York NY 10023

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Davis Wright Tremaine Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	0	8

Transaction ID: C31571

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Pete Kutschera

Mailing Address 210 Osborne Road

City State Zip Code
West Albany NY 12205

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
New York State Social Worker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: C31853

Amount of Each Receipt this Period
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 525.00

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: PAGE 27 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Bonnie Landi

Mailing Address 20 Arlmont Street

City State Zip Code
Kingston NY 12401

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

Name of Employer Occupation
Ulster YouthBuild Partner-ship Program Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: C31551

Amount of Each Receipt this Period
75.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bonnie Landi

Mailing Address 20 Arlmont Street

City State Zip Code
Kingston NY 12401

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

Name of Employer Occupation
Ulster YouthBuild Partner-ship Program Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C31845

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Leonard Levitan

Mailing Address PO Box 419

City State Zip Code
Phoenicia NY 12464

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

Name of Employer Occupation
Catskill Water Discovery Center Administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 4 / 2 0 0 8

Transaction ID: C31796

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

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: PAGE 28 / 94
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Bernie Levy

Mailing Address 157 Leroy Street

City Binghamton State NY Zip Code 13905

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt: 05 / 21 / 2008

Transaction ID: C31612

Amount of Each Receipt this Period: 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bernie Levy

Mailing Address 157 Leroy Street

City Binghamton State NY Zip Code 13905

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt: 06 / 04 / 2008

Transaction ID: C31618

Amount of Each Receipt this Period: 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Catherine Lewis

Mailing Address 320 East 46th Street Apt 9E

City New York State NY Zip Code 10017

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

800.00

Date of Receipt: 04 / 11 / 2008

Transaction ID: C31501

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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: PAGE 30 / 94
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
John Macauley

Mailing Address 17 Poplar Court

City Kingston State NY Zip Code 12401

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

330.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: C31522

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
John Macauley

Mailing Address 17 Poplar Court

City Kingston State NY Zip Code 12401

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

330.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: C31638

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
John Macauley

Mailing Address 17 Poplar Court

City Kingston State NY Zip Code 12401

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

330.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C31858

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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: PAGE 31 / 94
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial) Kenneth McClane		Date of Receipt MM / DD / YYYY 05 / 20 / 2008
Mailing Address 114 Glenside Road		Transaction ID: C31615
City Ithaca	State NY	Zip Code 14850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cornell University	Occupation College Teacher	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 900.00	

B.

Full Name (Last, First, Middle Initial) Barney McHenry		Date of Receipt MM / DD / YYYY 04 / 11 / 2008
Mailing Address 164 E. 72nd Street		Transaction ID: C31502
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Not Employed	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1150.00	

C.

Full Name (Last, First, Middle Initial) Glenn McNitt		Date of Receipt MM / DD / YYYY 06 / 18 / 2008
Mailing Address 7 Outlook Farm Rd.		Transaction ID: C31801
City New Paltz	State NY	Zip Code 12561
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer State University of New York	Occupation Professor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 94
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Sonya G Messer

Mailing Address 49 River View Terrace

City State Zip Code
Kingston NY 12401

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

Name of Employer Always There Health Care Occupation Registered Nurse

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C31854

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Joanne Michaels

Mailing Address PO Box 425

City State Zip Code
Woodstock NY 12498

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

Name of Employer Self Occupation Author

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 0 / 2 0 0 8

Transaction ID: C31715

Amount of Each Receipt this Period
125.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Joan Millens

Mailing Address 150 Lounsbury Place

City State Zip Code
Kingston NY 12401

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 8 / 2 0 0 8

Transaction ID: C31802

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2125.00**

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: PAGE 33 / 94
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Jayesh V Modhwadiya

Mailing Address 3046 Route 9W

City State Zip Code
New Windsor NY 12553

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

Name of Employer Self Occupation
Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 8

Transaction ID: C31870

Amount of Each Receipt this Period
140.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Hotel Room

B. Full Name (Last, First, Middle Initial)
Arnold Moss

Mailing Address 232 East 62nd Street

City State Zip Code
New York NY 10021

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

Name of Employer Self Occupation
Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 8

Transaction ID: C31573

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Arnold Moss

Mailing Address 232 East 62nd Street

City State Zip Code
New York NY 10021

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

Name of Employer Self Occupation
Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 8

Transaction ID: C31572

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2640.00

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: PAGE 34 / 94

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Stacy R Nagelberg

Mailing Address 25 Shotwell Road

City State Zip Code
Woodstock NY 12498

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

Name of Employer Self Occupation
Self Writer

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 312.50

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: C31642

Amount of Each Receipt this Period

312.50

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Marc Newman

Mailing Address 3101 Shippers Road

City State Zip Code
Vestal NY 13850

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

Name of Employer Self Occupation
Self Developer

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: C31627

Amount of Each Receipt this Period

400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Matthew Ostoyich

Mailing Address 142 Sila Drive

City State Zip Code
Saugerties NY 12477

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

Name of Employer Not Employed Occupation
Not Employed Retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C31846

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

962.50

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: PAGE 35 / 94
(check only one)

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

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 Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Michael Pavlov

Mailing Address 220 White Port Road

City State Zip Code
Kingston NY 12401

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

Name of Employer Occupation
Cobra Systems Inc CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3150.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: C31554

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Lynn Phillips

Mailing Address PO Box 345

City State Zip Code
Hancock NY 13783

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

Name of Employer Occupation
Self Writer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: C31825

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Mario Picayo

Mailing Address 109 Echo Hill Road

City State Zip Code
Saugerties NY 12477

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

Name of Employer Occupation
Self Art Reviewer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 8

Transaction ID: C31806

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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: PAGE 36 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Karl Pillemer
Mailing Address 135 Hudson Street
City Ithaca State NY Zip Code 14850
FEC ID number of contributing federal political committee. **C**
Name of Employer Cornell University Occupation Professor
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00
Date of Receipt 06 / 30 / 2008
Transaction ID: C31847
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David W Ping
Mailing Address 272 Vlei Road
City Rhinebeck State NY Zip Code 12572
FEC ID number of contributing federal political committee. **C**
Name of Employer Healthquest Occupation VP Strategic Planning
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 06 / 13 / 2008
Transaction ID: C31778
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James Raglione
Mailing Address PO Box 345
City Hancock State NY Zip Code 13783
FEC ID number of contributing federal political committee. **C**
Name of Employer Regele Builders Occupation Construction Supervisor
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 06 / 27 / 2008
Transaction ID: C31826
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 750.00
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: PAGE 37 / 94
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Marvin Rappaport

Mailing Address P.O. Box 1

City State Zip Code
Forestburgh NY 12777

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

Name of Employer Occupation
Charter Communications Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
04 / 29 / 2008

Transaction ID: C31578

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Barbara Rissman

Mailing Address 132 Cannon Circle

City State Zip Code
Woodstock NY 12498

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

Name of Employer Occupation
Self Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2008

Transaction ID: C31807

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Joyce Salimeno

Mailing Address 85 Sarine Road

City State Zip Code
Wurtsboro NY 12790

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

Name of Employer Occupation
Gersten Hillman Insurance Agency Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2008

Transaction ID: C31503

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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: PAGE 38 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Fannette H Sawyer

Mailing Address 10 Longwood Drive Apt 463

City State Zip Code
Westwood MA 02090

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: C31707

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael Skarzynski

Mailing Address 2 Ely Park Boulevard Apt 4

City State Zip Code
Binghamton NY 13905

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

390.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2008

Transaction ID: C31700

Amount of Each Receipt this Period
60.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Gerald Sonnenfeld

Mailing Address 13 Pine Meadow Road

City State Zip Code
Vestal NY 13850

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

Name of Employer Binghamton University Occupation VP for Research

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

275.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: C31628

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **660.00**

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: PAGE 39 / 94
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<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 Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Jean Stein	Date of Receipt MM / DD / YYYY 04 / 28 / 2008
	Mailing Address 10 Gracie Square	Transaction ID: C31576
	City State Zip Code New York NY 10028	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self Occupation Self Author	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Richard Stoloff	Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address PO Box 1129	Transaction ID: C31595
	City State Zip Code Monticello NY 12701	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self Occupation Self Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Richard Chalmer Strain	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 15 Loockerman Avenue	Transaction ID: C31873
	City State Zip Code Poughkeepsie NY 12601	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer C.B. Strain & Son Occupation Owner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Tara Sullivan		Date of Receipt
	Mailing Address 140 Echo Valley Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 1 7 / 2 0 0 8
	City	State	Zip Code
	Red Hook	NY	12571
	FEC ID number of contributing federal political committee. C		Transaction ID: C31530
Name of Employer Bard College		Occupation Assistant Director	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 1800.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Tara Sullivan		Date of Receipt
	Mailing Address 140 Echo Valley Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 0 8
	City	State	Zip Code
	Red Hook	NY	12571
	FEC ID number of contributing federal political committee. C		Transaction ID: C31596
Name of Employer Bard College		Occupation Assistant Director	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 1800.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Tara Sullivan		Date of Receipt
	Mailing Address 140 Echo Valley Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Red Hook	NY	12571
	FEC ID number of contributing federal political committee. C		Transaction ID: C31659
Name of Employer Bard College		Occupation Assistant Director	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 1800.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Alan Sussman
Mailing Address Box 221
City State Zip Code
Bearsville NY 12409
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 06 / 10 / 2008
Transaction ID: C31717
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Norma Tallon
Mailing Address 47 Orton Avenue
City State Zip Code
Binghamton NY 13901
FEC ID number of contributing federal political committee. **C**
Name of Employer Not Employed Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 06 / 05 / 2008
Transaction ID: C31683
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
David Taylor
Mailing Address PO Box 1030
City State Zip Code
Port Ewen NY 12466
FEC ID number of contributing federal political committee. **C**
Name of Employer Not Employed Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 380.00
Date of Receipt 04 / 11 / 2008
Transaction ID: C31557
Amount of Each Receipt this Period 180.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1280.00
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: PAGE 42 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

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

Mailing Address 674 River Road

City State Zip Code
Newburgh NY 12550

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

Name of Employer Self Occupation Recycling

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: C31848

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Hal Teitelbaum, MD

Mailing Address 212 Pilgrim Corners Road

City State Zip Code
Middletown NY 10940

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

Name of Employer Crystal Run Healthcare Occupation Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	0	8

Transaction ID: C31609

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Annette Testani

Mailing Address 19 Carhart Ave.

City State Zip Code
Johnson City NY 13790

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

Name of Employer NYS Dept of Motor Vehicles Occupation Clerk

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	8	/	2	0	0	8

Transaction ID: C31701

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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: PAGE 43 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Leon U Thomas

Mailing Address 57 Clinton Ave.

City Waverly State NY Zip Code 14892

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 100.00

Transaction ID: C31720

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Liz Thorndike

Mailing Address 38 Lake Lacoma Drive

City Pittsford State NY Zip Code 14534

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 100.00

Transaction ID: C31538

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Giacomo Vieste

Mailing Address 2145 State Route 28A

City Olivebridge State NY Zip Code 12461

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

Name of Employer Self Occupation Filmmaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 250.00

Transaction ID: C31808

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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: PAGE 44 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Melva Wade

Mailing Address 45 Hornbeck Lane

City Accord State NY Zip Code 12404

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 50.00

Transaction ID: C31648

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jerry Wapner

Mailing Address 45 Mill Hill Rd.
P.O. Box 572

City Woodstock State NY Zip Code 12498

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

Name of Employer Self Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 100.00

Transaction ID: C31649

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Pat Webb

Mailing Address 255 West 84th St. #11B

City New York State NY Zip Code 10024

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

Name of Employer Self Occupation Antique Dealer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 100.00

Transaction ID: C31837

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

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: PAGE 45 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Mark Whalen
Mailing Address 11 The Arena Street
City Binghamton State NY Zip Code 13903
FEC ID number of contributing federal political committee. **C**
Name of Employer City of Binghamton Occupation Paramedic
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 06 / 18 / 2008
Transaction ID: C31766
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Zali Win
Mailing Address PO Box 257
City Accord State NY Zip Code 12404
FEC ID number of contributing federal political committee. **C**
Name of Employer Calyon Occupation Banker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 290.00
Date of Receipt 04 / 28 / 2008
Transaction ID: C31579
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Izzy Yanay
Mailing Address HVFG LLC
80 Brooks Road
City Ferndale State NY Zip Code 12734
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Farmer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1600.00
Date of Receipt 04 / 11 / 2008
Transaction ID: C31497
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 94
(check only one)

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

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 Maurice Hinchey

A. Full Name (Last, First, Middle Initial) Paula Yeager Mailing Address 5 Triangle Road PO Box 510 City State Zip Code Liberty NY 12754 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Realtor Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 0 / 2 0 0 8 Transaction ID: C31616 Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	550.00

B. Full Name (Last, First, Middle Initial) Ethel Zwick Mailing Address 30 Bruceville Road City State Zip Code High Falls NY 12440 FEC ID number of contributing federal political committee. C Name of Employer Not Employed Occupation Retired Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 8 Transaction ID: C31527 Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00

C. Full Name (Last, First, Middle Initial) Ethel Zwick Mailing Address 30 Bruceville Road City State Zip Code High Falls NY 12440 FEC ID number of contributing federal political committee. C Name of Employer Not Employed Occupation Retired Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 8 Transaction ID: C31597 Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00

SUBTOTAL of Receipts This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	51555.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
AFSCME PEOPLE PAC
Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70000120

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: C31860
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Agri-Mark LEC
Mailing Address PO Box 5800

City Lawrence State MA Zip Code 01842

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: C31749
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Amer Fed of Gov't Employees PAC
Mailing Address 80 F Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00009936

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: C31747
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 94
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
American Association for Justice PAC

Mailing Address 1050 31st Street NW

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: C31746

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Crystal Sugar PAC

Mailing Address 101 North Third Street

City Moorhead State MN Zip Code 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt: 06 / 04 / 2008
Transaction ID: C31682

Amount of Each Receipt this Period: 3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Federation of Teachers (COPE)

Mailing Address 555 New Jersey Avenue, NW

City Washington State DC Zip Code 20001-2079

FEC ID number of contributing federal political committee. **C** C70002472

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: C31748

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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: PAGE 49 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
American Medical Association PAC
Mailing Address 1101 Vermont Avenue NW
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00000422
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 06 / 30 / 2008
Transaction ID: C31862
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Nurses Association PAC
Mailing Address 8515 Georgia Avenue Suite 400
City Silver Spring State MD Zip Code 20910
FEC ID number of contributing federal political committee. **C** C00017525
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt 06 / 27 / 2008
Transaction ID: C31872
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
BAE SYSTEMS USA PAC
Mailing Address 1300 North 17th Street Suite 1400
City Arlington State VA Zip Code 22209
FEC ID number of contributing federal political committee. **C** C00281212
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00
Date of Receipt 06 / 30 / 2008
Transaction ID: C31861
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00
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: PAGE 50 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Boilermakers-Blacksmiths LEAP
Mailing Address 753 State Avenue, Suite 565
City Kansas City State KS Zip Code 66101
FEC ID number of contributing federal political committee. **C** C00005157
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 06 / 05 / 2008
Transaction ID: C31750
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Employee Stock Ownership Plans PAC
Mailing Address 1726 M Street NW Suite 501
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00196089
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3750.00
Date of Receipt 06 / 05 / 2008
Transaction ID: C31751
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Honeywell International Political Action Committee
Mailing Address 101 Constitution Avenue NW Suite 500 West
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C** C00096156
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 06 / 27 / 2008
Transaction ID: C31819
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00
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: PAGE 51 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Human Rights Campaign Fund PAC

Mailing Address 1101 14th Street, NW
Suite 200

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 05 / 2008
Transaction ID: C31757
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ice Cream Milk & Cheese PAC

Mailing Address 1250 H street NW Suite 900

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00128231

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 05 / 2008
Transaction ID: C31752
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Int'l Bro. Of Electrical Workers-COPE

Mailing Address 900 Seventh Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 06 / 05 / 2008
Transaction ID: C31759
 Amount of Each Receipt this Period 1800.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3800.00

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: PAGE 52 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Ironworkers PAL

Mailing Address 1750 New York Ave NW Ste 400

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt: 04 / 29 / 2008
Transaction ID: C31586
 Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
L-3 Communications Corporation PAC

Mailing Address 600 Third Avenue

City New York State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C** C00338087

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: C31753
 Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees PAC

Mailing Address 1550 Crystal Drive
Crystal Square Two, Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 06 / 18 / 2008
Transaction ID: C31763
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

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: PAGE 53 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Minn-Dak Farmers Cooperative PAC

Mailing Address 7525 Red River Road

City State Zip Code
Wahpeton ND 58075

FEC ID number of contributing federal political committee. **C** C00164939

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 7 / 2 0 0 8

Transaction ID: C31820

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NAPUS PAC

Mailing Address 8 Herbert Street

City State Zip Code
Alexandria VA 22305-2600

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 7 / 2 0 0 8

Transaction ID: C31542

Amount of Each Receipt this Period
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Association PAC

Mailing Address 1101 King Street Suite 600

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 7 / 2 0 0 8

Transaction ID: C31528

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4100.00

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: PAGE 54 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
National Community Pharmacists Association PAC
Mailing Address 100 Daingerfield Road
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00030809
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 06 / 05 / 2008
Transaction ID: C31754
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Realtors PAC
Mailing Address 430 N. Michigan Avenue
City Chicago State IL Zip Code 60611
FEC ID number of contributing federal political committee. **C** C70002563
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00
Date of Receipt 06 / 08 / 2008
Transaction ID: C31685
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Sierra Club PC
Mailing Address 408 C Street NE
City Washington State DC Zip Code 20002
FEC ID number of contributing federal political committee. **C** C00135368
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 10.00
Date of Receipt 06 / 06 / 2008
Transaction ID: C31810
Amount of Each Receipt this Period 10.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Website Endorsement

SUBTOTAL of Receipts This Page (optional) ► 6010.00
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: PAGE 55 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Society of American Florists PAC

Mailing Address 1601 Duke Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00111302

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 7 / 2 0 0 8

Transaction ID: C31821

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Susan Zimet For Senate

Mailing Address PO Box 444

City State Zip Code
New Paltz NY 12561

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 1 / 2 0 0 8

Transaction ID: C31561

Amount of Each Receipt this Period
75.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
U.A. Plumbers & Pipefitters (PEC)

Mailing Address 901 Massachusetts Avenue, NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 1 / 2 0 0 8

Transaction ID: C31610

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6075.00**

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: PAGE 56 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
United Auto Workers V CAP
Mailing Address 1757 N Street, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 06 / 27 / 2008
Transaction ID: C31822
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
United Egg Association EGGPAC
Mailing Address 1720 Windward Concourse Ste 230

City Alpharetta State GA Zip Code 30005

FEC ID number of contributing federal political committee. **C** C00172841

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: C31755
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
WineAmerica PAC
Mailing Address 1212 New York Ave NW Ste 425

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00173369

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: C31756
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

TOTAL This Period (last page this line number only) ► 38235.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 57 / 94
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Ulster Savings Bank

Mailing Address 280 Wall Street

City State Zip Code
Kingston NY 12401

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1187.02

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2008

Transaction ID: C31871

Amount of Each Receipt this Period
210.63

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	210.63
TOTAL This Period (last page this line number only)	▶	210.63

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AT&T Business Service</p> <p>Mailing Address PO Box 371302</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6432</p> <p>Date of Disbursement 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 66.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AT&T Business Service</p> <p>Mailing Address PO Box 371302</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6433</p> <p>Date of Disbursement 04 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 58.49</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AT&T Business Service</p> <p>Mailing Address PO Box 371302</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6434</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 58.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

183.98

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) AT&T Business Service</p> <p>Mailing Address PO Box 371302</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6402 Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 40.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Bear Restaurant</p> <p>Mailing Address Route 212</p> <p>City Bearsville State NY Zip Code 12409</p> <p>Purpose of Disbursement Dinner Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6460 Date of Disbursement 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 216.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Bear Restaurant</p> <p>Mailing Address Route 212</p> <p>City Bearsville State NY Zip Code 12409</p> <p>Purpose of Disbursement Dinner Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6461 Date of Disbursement 06 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 102.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

358.73

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Campaign Finance Consultants

Mailing Address 10 G Street NE Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement Campaign Consultant
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D6436
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

B.

Full Name (Last, First, Middle Initial)
Campaign Finance Consultants

Mailing Address 10 G Street NE Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement Campaign Consultant
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D6437
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

C.

Full Name (Last, First, Middle Initial)
Catskill Art & Office Supply

Mailing Address 328 Wall Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement Office Supplies
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D6507
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional) ►

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial) Catskill Art & Office Supply Mailing Address 328 Wall Street City Kingston State NY Zip Code 12401 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D6508 Date of Disbursement 05 / 05 / 2008
	Amount of Each Disbursement this Period 155.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Catskill Art & Office Supply Mailing Address 328 Wall Street City Kingston State NY Zip Code 12401 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D6540 Date of Disbursement 05 / 14 / 2008
	Amount of Each Disbursement this Period 105.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Catskill Art & Office Supply Mailing Address 328 Wall Street City Kingston State NY Zip Code 12401 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D6509 Date of Disbursement 06 / 05 / 2008
	Amount of Each Disbursement this Period 122.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	383.19
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CDPHP</p> <p>Mailing Address Patroon Creek Corp Ctr 1223 Washington Avenue</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6496</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 192.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CDPHP</p> <p>Mailing Address Patroon Creek Corp Ctr 1223 Washington Avenue</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6497</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 175.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) CDPHP</p> <p>Mailing Address Patroon Creek Corp Ctr 1223 Washington Avenue</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6498</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 175.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>544.50</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) Downtown Restaurant</p> <p>Mailing Address One West Strand</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6492</p> <p>Date of Disbursement 04 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Events Unlimited</p> <p>Mailing Address 5 Tissal Road</p> <p>City Saugerties State NY Zip Code 12477</p> <p>Purpose of Disbursement Tent and Stage Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6554</p> <p>Date of Disbursement 06 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 1453.14</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Flower Nest</p> <p>Mailing Address 238 Plaza Road Kingston Plaza</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6535</p> <p>Date of Disbursement 05 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 114.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1867.89

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Flower Nest	Transaction ID: D6536 Date of Disbursement 06 / 05 / 2008
	Mailing Address 238 Plaza Road Kingston Plaza	Amount of Each Disbursement this Period 21.60
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FTD.Com	Transaction ID: D6440 Date of Disbursement 04 / 01 / 2008
	Mailing Address 3113 Woodcreek Drive	Amount of Each Disbursement this Period 214.94
	City Downers Grove State IL Zip Code 60515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FTD.Com	Transaction ID: D6445 Date of Disbursement 04 / 30 / 2008
	Mailing Address 3113 Woodcreek Drive	Amount of Each Disbursement this Period 337.94
	City Downers Grove State IL Zip Code 60515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	574.88
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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) FTD.Com	Transaction ID: D6470
	Mailing Address 3113 Woodcreek Drive	Date of Disbursement 06 / 06 / 2008
	City Downers Grove State IL Zip Code 60515	Amount of Each Disbursement this Period 135.96
	Purpose of Disbursement Flowers	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) FTD.Com	Transaction ID: D6451
	Mailing Address 3113 Woodcreek Drive	Date of Disbursement 06 / 09 / 2008
	City Downers Grove State IL Zip Code 60515	Amount of Each Disbursement this Period 261.95
	Purpose of Disbursement Flowers	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Edward Gersh	Transaction ID: D6400
	Mailing Address 21 Sweet Hollow Road	Date of Disbursement 06 / 14 / 2008
	City Huntington State NY Zip Code 11743	Amount of Each Disbursement this Period 1800.00
	Purpose of Disbursement Catering	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	* in-kind received
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2197.91
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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Holli Gersh

Transaction ID: D6401
Date of Disbursement

Mailing Address 21 Sweet Hollow Road

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	0	8

City State Zip Code
Huntington NY 11743

Amount of Each Disbursement this Period

1750.00

Purpose of Disbursement
Catering

Category/ Type

Candidate Name

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

* in-kind received

State: District:

B.

Full Name (Last, First, Middle Initial)
Hewlett-Packard

Transaction ID: D6446
Date of Disbursement

Mailing Address 1800 Green Hills Road

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	0	8

City State Zip Code
Scotts Valley CA 95066

Amount of Each Disbursement this Period

2168.39

Purpose of Disbursement
Office Equipment

Category/ Type

Candidate Name

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Hewlett-Packard

Transaction ID: D6449
Date of Disbursement

Mailing Address 1800 Green Hills Road

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	8

City State Zip Code
Scotts Valley CA 95066

Amount of Each Disbursement this Period

61.61

Purpose of Disbursement
Office Equipment

Category/ Type

Candidate Name

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3980.00

TOTAL This Period (last page this line number only)

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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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Hillside Manor

Mailing Address 240 Boulevard

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6493
Date of Disbursement

04 / 11 / 2008

Amount of Each Disbursement this Period

1300.00

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

B.

Full Name (Last, First, Middle Initial)
Il Cena Colo

Mailing Address 50 Front Street

City Newburgh State NY Zip Code 12550

Purpose of Disbursement
Dinner Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6457
Date of Disbursement

04 / 25 / 2008

Amount of Each Disbursement this Period

148.53

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

C.

Full Name (Last, First, Middle Initial)
Jennifer Madden

Mailing Address 22 Burgevin Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Office Rent

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6421
Date of Disbursement

04 / 01 / 2008

Amount of Each Disbursement this Period

285.00

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

SUBTOTAL of Disbursements This Page (optional)

1733.53

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) Jennifer Madden</p> <p>Mailing Address 22 Burgevin Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6422</p> <p>Date of Disbursement 04 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 285.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Jennifer Madden</p> <p>Mailing Address 22 Burgevin Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6423</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 285.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Le Canard Enchaîne</p> <p>Mailing Address 276 Fair Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Dinner Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6393</p> <p>Date of Disbursement 04 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 354.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

924.54

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) Le Canard Enchaîne</p> <p>Mailing Address 276 Fair Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6411 Date of Disbursement 06 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 380.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) M&T Bank</p> <p>Mailing Address 108 N Front Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6415 Date of Disbursement 04 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 25.92</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) M&T Bank</p> <p>Mailing Address 108 N Front Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6416 Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 276.04</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

681.96

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A.</p> <p>Full Name (Last, First, Middle Initial) M&T Bank</p> <p>Mailing Address 108 N Front Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6417</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 52.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MCI, Inc.</p> <p>Mailing Address 500 Second Ave. SE PO Box 3160</p> <p>City Cedar Rapids State IA Zip Code 52401</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6504</p> <p>Date of Disbursement 04 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 58.34</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) MCI, Inc.</p> <p>Mailing Address 500 Second Ave. SE PO Box 3160</p> <p>City Cedar Rapids State IA Zip Code 52401</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6505</p> <p>Date of Disbursement 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 59.18</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

169.80

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) MCI, Inc.	Transaction ID: D6506 Date of Disbursement 06 / 18 / 2008
	Mailing Address 500 Second Ave. SE PO Box 3160	Amount of Each Disbursement this Period 86.67
	City Cedar Rapids State IA Zip Code 52401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) NGP Software Inc.	Transaction ID: D6531 Date of Disbursement 05 / 02 / 2008
	Mailing Address 1225 Eye St NW, Suite 1225	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20005	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Consultant Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) NGP Software Inc.	Transaction ID: D6532 Date of Disbursement 05 / 23 / 2008
	Mailing Address 1225 Eye St NW, Suite 1225	Amount of Each Disbursement this Period 1647.00
	City Washington State DC Zip Code 20005	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Consultant Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	4233.67
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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) NYS Income Tax</p> <p>Mailing Address W. A. Harriman Campus</p> <p>City Albany State NY Zip Code 12227-0134</p> <p>Purpose of Disbursement Wage Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6549</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 239.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Peekamoose Restaurant</p> <p>Mailing Address 8373 Route 28</p> <p>City Big Indian State NY Zip Code 12410</p> <p>Purpose of Disbursement Dinner Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6396</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 134.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Plaza Pizza</p> <p>Mailing Address Kingston Plaza</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6414</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 23.44</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

398.31

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Portobello</p> <p>Mailing Address 39 John Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Dinner Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6394</p> <p>Date of Disbursement 04 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 98.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Portobello</p> <p>Mailing Address 39 John Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Dinner Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6397</p> <p>Date of Disbursement 04 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 90.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Portobello</p> <p>Mailing Address 39 John Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Dinner Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6459</p> <p>Date of Disbursement 05 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 120.33</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

308.45

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 50 Main Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6476
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	8

Amount of Each Disbursement this Period

205.41

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

B.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 50 Main Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6477
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	0	8

Amount of Each Disbursement this Period

82.00

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

C.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 50 Main Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement
PO Box Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6478
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	8

Amount of Each Disbursement this Period

92.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

379.41

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

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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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 50 Main Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6479
Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

41.00

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

B.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 50 Main Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6480
Date of Disbursement

05 / 13 / 2008

Amount of Each Disbursement this Period

126.00

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

C.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 50 Main Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6481
Date of Disbursement

05 / 15 / 2008

Amount of Each Disbursement this Period

672.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

839.00

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 50 Main Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6482</p> <p>Date of Disbursement 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 84.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 50 Main Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6483</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 85.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 50 Main Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6484</p> <p>Date of Disbursement 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 84.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

253.01

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 50 Main Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6485

Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

294.00

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

B.

Full Name (Last, First, Middle Initial)
Preferred Mutual Insurance Co

Mailing Address PO Box 888

City Norwich State NY Zip Code 13815

Purpose of Disbursement

Office Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6516

Date of Disbursement

04 / 22 / 2008

Amount of Each Disbursement this Period

400.79

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

C.

Full Name (Last, First, Middle Initial)
REM Printing

Mailing Address 55 Railroad Avenue

City Albany State NY Zip Code 12205

Purpose of Disbursement

Printing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6555

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

583.20

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

SUBTOTAL of Disbursements This Page (optional) ▶

1277.99

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) Staples The Office Superstore</p> <p>Mailing Address 1399 Ulster Ave.</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6447</p> <p>Date of Disbursement 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 413.21</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Staples The Office Superstore</p> <p>Mailing Address 1399 Ulster Ave.</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6518</p> <p>Date of Disbursement 04 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 44.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Staples The Office Superstore</p> <p>Mailing Address 1399 Ulster Ave.</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6519</p> <p>Date of Disbursement 04 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 35.63</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

493.40

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Staples The Office Superstore	Transaction ID: D6520 Date of Disbursement 05 / 13 / 2008
	Mailing Address 1399 Ulster Ave.	Amount of Each Disbursement this Period 143.53
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Staples The Office Superstore	Transaction ID: D6521 Date of Disbursement 05 / 15 / 2008
	Mailing Address 1399 Ulster Ave.	Amount of Each Disbursement this Period 140.26
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Staples The Office Superstore	Transaction ID: D6522 Date of Disbursement 05 / 18 / 2008
	Mailing Address 1399 Ulster Ave.	Amount of Each Disbursement this Period 137.06
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	420.85
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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Staples The Office Superstore	Transaction ID: D6523 Date of Disbursement 05 / 23 / 2008
	Mailing Address 1399 Ulster Ave.	Amount of Each Disbursement this Period 105.82
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Staples The Office Superstore	Transaction ID: D6524 Date of Disbursement 05 / 30 / 2008
	Mailing Address 1399 Ulster Ave.	Amount of Each Disbursement this Period 67.68
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Staples The Office Superstore	Transaction ID: D6450 Date of Disbursement 06 / 09 / 2008
	Mailing Address 1399 Ulster Ave.	Amount of Each Disbursement this Period 463.26
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	636.76
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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) State Insurance Fund	Transaction ID: D6515 Date of Disbursement 04 / 22 / 2008
	Mailing Address GPO Box 5381	Amount of Each Disbursement this Period 382.60
	City New York State NY Zip Code 10087	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Employee Benefit Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Susanne Herl	Transaction ID: D6472 Date of Disbursement 04 / 01 / 2008
	Mailing Address 796 Murray Road	Amount of Each Disbursement this Period 3441.38
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Susanne Herl	Transaction ID: D6473 Date of Disbursement 04 / 30 / 2008
	Mailing Address 796 Murray Road	Amount of Each Disbursement this Period 3441.38
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	7265.36
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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) Susanne Herl</p> <p>Mailing Address 796 Murray Road</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6474</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 3441.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Susanne Herl</p> <p>Mailing Address 796 Murray Road</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Reimburse Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6456</p> <p>Date of Disbursement 06 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 195.84</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Susanne Herl</p> <p>Mailing Address 796 Murray Road</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Reimburse Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6405</p> <p>Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 65.57</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3702.79

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Time Warner Mid Hudson

Transaction ID: D6425

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	8

Mailing Address 1279 Route 300

Amount of Each Disbursement this Period

268.67

City Newburgh State NY Zip Code 12550

Purpose of Disbursement
Cable

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Time Warner Mid Hudson

Transaction ID: D6426

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	8

Mailing Address 1279 Route 300

Amount of Each Disbursement this Period

134.38

City Newburgh State NY Zip Code 12550

Purpose of Disbursement
Cable

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Time Warner Mid Hudson

Transaction ID: D6427

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

Mailing Address 1279 Route 300

Amount of Each Disbursement this Period

127.08

City Newburgh State NY Zip Code 12550

Purpose of Disbursement
Cable

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

530.13

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

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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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) U.C. Chamber of Commerce</p> <p>Mailing Address 55 Albany Avenue</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6514</p> <p>Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1121.61</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Ulster Savings Bank</p> <p>Mailing Address 280 Wall Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Wage Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6340</p> <p>Date of Disbursement 04 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 1415.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Ulster Savings Bank</p> <p>Mailing Address 280 Wall Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6566</p> <p>Date of Disbursement 04 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2547.03

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ulster Savings Bank</p> <p>Mailing Address 280 Wall Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Wage Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6541</p> <p>Date of Disbursement 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 1415.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ulster Savings Bank</p> <p>Mailing Address 280 Wall Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Wage Withholding Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6542</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1415.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address P.O. Box 4980</p> <p>City Hagerstown State MD Zip Code 21747</p> <p>Purpose of Disbursement Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6500</p> <p>Date of Disbursement 04 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 16.71</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

2847.55

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
UPS

Transaction ID: D6501
Date of Disbursement

Mailing Address P.O. Box 4980

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

City Hagerstown State MD Zip Code 21747

Amount of Each Disbursement this Period

46.60

Purpose of Disbursement
Delivery

--

Candidate Name

--

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
UPS

Transaction ID: D6502
Date of Disbursement

Mailing Address P.O. Box 4980

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

City Hagerstown State MD Zip Code 21747

Amount of Each Disbursement this Period

40.13

Purpose of Disbursement
Delivery

--

Candidate Name

--

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: D6429
Date of Disbursement

Mailing Address P.O. Box 15124

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	8

City Albany State NY Zip Code 12250

Amount of Each Disbursement this Period

94.28

Purpose of Disbursement
Telephone

--

Candidate Name

--

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

181.01

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: D6430
Date of Disbursement

Mailing Address P.O. Box 15124

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

City Albany State NY Zip Code 12250

Amount of Each Disbursement this Period

100.03

Purpose of Disbursement
Telephone

--

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: D6431
Date of Disbursement

Mailing Address P.O. Box 15124

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

City Albany State NY Zip Code 12250

Amount of Each Disbursement this Period

99.64

Purpose of Disbursement
Telephone

--

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

199.67

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

46155.75

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A. Full Name (Last, First, Middle Initial)
Int'l Bro. Of Electrical Workers-COPE

Mailing Address 900 Seventh Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Contribution Refund

Candidate Name
Int'l Bro. Of Electrical Workers-COPE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6399

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

B. Full Name (Last, First, Middle Initial)
Intl Union of Operating Engineers/EPEC

Mailing Address 1125 Seventeenth St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution Refund

Candidate Name
Intl Union of Operating Engineers/EPEC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6398

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional) ►

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Bardavon 1869 Opera House

Mailing Address 35 Market Street

City Poughkeepsie State NY Zip Code 12601

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6486

Date of Disbursement

04 / 02 / 2008

Amount of Each Disbursement this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)
Bethel Woods Center for Arts

Mailing Address PO Box 222

City Liberty State NY Zip Code 12754

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6448

Date of Disbursement

04 / 02 / 2008

Amount of Each Disbursement this Period

1200.00

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

C.

Full Name (Last, First, Middle Initial)
Byrne for Congress

Mailing Address PO Box 2612

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
2008 VA-H-11-Primary

Candidate Name
Leslie L Byrne

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: VA District: 11

Transaction ID: D6551

Date of Disbursement

06 / 05 / 2008

Amount of Each Disbursement this Period

2000.00

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

SUBTOTAL of Disbursements This Page (optional)

4200.00

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Chamber Arts Festival of Marbletown	Transaction ID: D6490 Date of Disbursement 04 / 07 / 2008
	Mailing Address PO Box 663	Amount of Each Disbursement this Period 100.00
	City Stone Ridge State NY Zip Code 12484	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Contribution Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kilroy for Congress	Transaction ID: D6494 Date of Disbursement 04 / 17 / 2008
	Mailing Address 550 East Walnut Street Suite 305	Amount of Each Disbursement this Period 2000.00
	City Columbus State OH Zip Code 43215	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement 2008 OH-H-15-Primary Candidate Name Mary Jo Kilroy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kingston Hospital Foundation	Transaction ID: D6488 Date of Disbursement 04 / 07 / 2008
	Mailing Address 745 Grant Avenue	Amount of Each Disbursement this Period 300.00
	City Lake Katrine State NY Zip Code 12449	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Contribution Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2400.00
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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Kingston Hospital Foundation

Mailing Address 745 Grant Avenue

City Lake Katrine State NY Zip Code 12449

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6511

Date of Disbursement

04 / 17 / 2008

Amount of Each Disbursement this Period

370.00

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

B.

Full Name (Last, First, Middle Initial)
Mental Health Assoc In Dutchess County

Mailing Address 510 Haight Avenue

City Poughkeepsie State NY Zip Code 12603

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6547

Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

300.00

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

C.

Full Name (Last, First, Middle Initial)
Orange County Democratic Committee

Mailing Address 843 Union Ave 2nd Fl

City New Windsor State NY Zip Code 12553

Purpose of Disbursement
Contribution

Candidate Name

Orange County Democratic Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6545

Date of Disbursement

05 / 20 / 2008

Amount of Each Disbursement this Period

500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1170.00

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

<p>A. Full Name (Last, First, Middle Initial) Planned Parenthood</p> <p>Mailing Address 26 West Street</p> <p>City Newburgh State NY Zip Code 12550</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6487</p> <p>Date of Disbursement 04 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 350.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Planned Parenthood</p> <p>Mailing Address 26 West Street</p> <p>City Newburgh State NY Zip Code 12550</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6539</p> <p>Date of Disbursement 05 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 150.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) U.C. Chamber of Commerce</p> <p>Mailing Address 55 Albany Avenue</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6513</p> <p>Date of Disbursement 04 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 120.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	620.00
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)

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

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NAME OF COMMITTEE (In Full)
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)
Ulster County Democratic Committee

Mailing Address 292C Fair Street

City State Zip Code
Kingston NY 12401

Purpose of Disbursement
Contribution

Candidate Name
Ulster County Democratic Committee

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D6528

Date of Disbursement

05 / 01 / 2008

Amount of Each Disbursement this Period

500.00

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

B.

Full Name (Last, First, Middle Initial)
Visclosky for Congress

Mailing Address PO Box 10003

City State Zip Code
Merrillville IN 46411

Purpose of Disbursement
2008 IN-H-1-Primary

Candidate Name
Peter J Visclosky

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: IN District: 01

Transaction ID: D6556

Date of Disbursement

06 / 20 / 2008

Amount of Each Disbursement this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
YMCA of Kingston

Mailing Address 507 Broadway

City State Zip Code
Kingston NY 12401

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D6512

Date of Disbursement

04 / 18 / 2008

Amount of Each Disbursement this Period

250.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

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

10140.00