

**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)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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) James Taylor		Date of Receipt
	Mailing Address 674 River Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2008
	City	State	Zip Code
	Newburgh	NY	12550
	FEC ID number of contributing federal political committee. C		Transaction ID: C31848
Name of Employer Self		Occupation Recycling	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			<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) Hal Teitelbaum, MD		Date of Receipt
	Mailing Address 212 Pilgrim Corners Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 21 / 2008
	City	State	Zip Code
	Middletown	NY	10940
	FEC ID number of contributing federal political committee. C		Transaction ID: C31609
Name of Employer Crystal Run Healthcare		Occupation Physician	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			<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) Annette Testani		Date of Receipt
	Mailing Address 19 Carhart Ave.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 08 / 2008
	City	State	Zip Code
	Johnson City	NY	13790
	FEC ID number of contributing federal political committee. C		Transaction ID: C31701
Name of Employer NYS Dept of Motor Vehicles		Occupation Clerk	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 100.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			<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"/> 3400.00
TOTAL This Period (last page this line number only)	<input type="text"/>