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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS

00294900

A. Full Name, Mailing Address and ZIP Code Gigliotti, Joseph 1014 Sherman Drive Utica, N.Y. 13501	Name of Employer  Occupation Aggregate Year-to-Date > \$1,000	Date (month, day, year) 9/19/96	Amount of Each Receipt this Period \$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) 9/19/96 Amount of Each Receipt this Period \$1,000 Occupation Aggregate Year-to-Date > \$1,000		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) 9/19/96 Amount of Each Receipt this Period \$1,000 Occupation Aggregate Year-to-Date > \$1,000		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) 9/19/96 Amount of Each Receipt this Period \$1,000 Occupation Aggregate Year-to-Date > \$1,000		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) 9/19/96 Amount of Each Receipt this Period \$1,000 Occupation Aggregate Year-to-Date > \$1,700		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) 9/19/96 Amount of Each Receipt this Period \$1,000 Occupation Aggregate Year-to-Date > \$1,000		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) 9/19/96 Amount of Each Receipt this Period \$750 Occupation Aggregate Year-to-Date > \$1,000		

SUBTOTAL of Receipts This Page (optional)

6750

TOTAL This Period (last page this line number only)