

# REPORT OF RECEIPTS AND DISBURSEMENTS

1/85

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

SEP 3 11 49 AM '98

|                                                                                                                      |                             |                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------|
| 1. NAME OF COMMITTEE (in full)<br>Dear for Congress Inc.                                                             |                             | 2. FEC IDENTIFICATION NUMBER<br>C00329966                                                              |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported<br>5612 18th Avenue |                             |                                                                                                        |
| CITY, STATE, and ZIP CODE<br>Brooklyn NY 11204                                                                       | STATE / DISTRICT<br>NY / 09 | 3. IS THIS REPORT AN AMENDMENT?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |

## 4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☒ Twelfth day report preceding Primary (election type) election on 09/15/1998 in the State of NY
- ☐ July 15 Quarterly Report
- ☐ October 15 Quarterly Report ☐ Thirtieth day report following the General Election
- ☐ January 31 Year End Report on \_\_\_\_\_ in the State of \_\_\_\_\_
- ☐ July 31 Mid-Year Report (Non-election Year Only) ☐ Termination report

This report contains activity for ☒ Primary election ☐ General election ☐ Runoff election ☐ Special election

## SUMMARY

| 5. Covering period                                                                            | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|-----------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 07/01/1998 through 08/26/1998                                                                 |                         |                                   |
| 6. Net contributions (other than loans)                                                       |                         |                                   |
| (a) Total Contributions (other than loans) (from line 11(a))                                  | 265616.01               | 1095116.00                        |
| (b) Total Contribution Refunds (from line 20(d))                                              | 0.00                    | 0.00                              |
| (c) Net Contributions (other than loans) (subtract Line B(b) from 6(a))                       | 265616.01               | 1095116.00                        |
| 7. Net Operating Expenditures                                                                 |                         |                                   |
| (a) Total Operating Expenditures (from line 17)                                               | 1047839.34              | 1335840.65                        |
| (b) Total Offsets to Operating Expenditures (from line 14)                                    | 0.00                    | 0.00                              |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a))                                 | 1047839.34              | 1335840.65                        |
| 8. Cash on Hand at Close of Reporting Period (from line 27)                                   | 224930.54               |                                   |
| 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 20483  
Toll Free 800-424-9530  
Local 202-219-3420

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

Type or Print Name of Treasurer

Electronically Filed by Mr. Abraham Roth

Signature of Treasurer

Date

8/31/98

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

|  |  |  |  |  |  |  |  |  |  |
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FEC FORM 3  
(revised 4/87)

**DETAILED SUMMARY PAGE**  
**of Receipts and Disbursements**  
 (Page 2, FEC Form 3)

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|                                                                              |  |                                                               |                                           |
|------------------------------------------------------------------------------|--|---------------------------------------------------------------|-------------------------------------------|
| Name of Committee (in full)<br>Dear for Congress Inc.                        |  | Report Covering the Period<br>From: 07/01/1996 To: 08/28/1998 |                                           |
| <b>I. RECEIPTS</b>                                                           |  | <b>COLUMN A<br/>Total This Period</b>                         | <b>COLUMN B<br/>Calendar Year-To-Date</b> |
| 11. CONTRIBUTIONS (other than loans) FROM:                                   |  |                                                               |                                           |
| (a) Individuals/Persons Other Than Political Committees .....                |  |                                                               |                                           |
| (i) Itemized (use Schedule A) .....                                          |  | 245056.01                                                     |                                           |
| (ii) Unitemized .....                                                        |  | 14062.00                                                      |                                           |
| (iii) Total of contributions from Individuals .....                          |  | 259118.01                                                     | 1072886.00                                |
| (b) Political Party Committees .....                                         |  | 0.00                                                          | 0.00                                      |
| (c) Other Political Committees (such as PACs) .....                          |  | 6500.00                                                       | 22250.00                                  |
| (d) The Candidate .....                                                      |  | 0.00                                                          | 0.00                                      |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(ii), (b), (c) and (d)) |  | 265618.01                                                     | 1095116.00                                |
| 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 13(a) and (b)) .....                                    |  | 0.00                                                          | 0.00                                      |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....         |  | 0.00                                                          | 0.00                                      |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....                         |  | 1425.43                                                       | 5478.56                                   |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) .....                   |  | 267043.44                                                     | 1100694.56                                |
| <b>II. DISBURSEMENTS</b>                                                     |  |                                                               |                                           |
| 17. OPERATING EXPENDITURES .....                                             |  | 1047639.34                                                    | 1335840.65                                |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....                           |  | 0.00                                                          | 0.00                                      |
| 19. LOAN REPAYMENTS:                                                         |  |                                                               |                                           |
| (a) Of Loans Made or Guaranteed by the Candidate .....                       |  | 0.00                                                          | 0.00                                      |
| (b) Of All Other Loans .....                                                 |  | 0.00                                                          | 0.00                                      |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....                          |  | 0.00                                                          | 0.00                                      |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |  |                                                               |                                           |
| (a) Individuals/Persons Other Than Political Committees .....                |  | 0.00                                                          | 0.00                                      |
| (b) Political Party Committees .....                                         |  | 0.00                                                          | 0.00                                      |
| (c) Other Political Committees (such as PACs) .....                          |  | 0.00                                                          | 0.00                                      |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) .....                |  | 0.00                                                          | 0.00                                      |
| 21. OTHER DISBURSEMENTS .....                                                |  | 40.50                                                         | 23460.49                                  |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) .....              |  | 1047884.84                                                    | 1358301.14                                |

**III. CASH SUMMARY**

|                                                                              |            |     |
|------------------------------------------------------------------------------|------------|-----|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....                      | 1005771.94 | 23. |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....                          | 267043.44  | 24. |
| 25. SUBTOTAL (add Line 23 and Line 24) .....                                 | 1272815.38 | 25. |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....                     | 1047884.84 | 26. |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | 224930.54  | 27. |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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)  
Dear for Congress Inc.

|                                                                                                                                        |                                                     |                                              |                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Terenzio Schettini<br>1764 80th Street<br><br>Brooklyn NY 11204                 | <b>Name of Employer</b><br><br><b>Occupation</b>    | <b>Date (month, day, year)</b><br>07/01/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 250.00                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Larry Silverstein<br>521 5th Avenue<br><br>New York NY 10175                    | <b>Name of Employer</b><br>Silverstein Properties   | <b>Date (month, day, year)</b><br>07/01/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 500.00                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Adam Thaler<br>1815 Avenue I<br><br>Brooklyn NY 11230                           | <b>Name of Employer</b><br>Coopers Thaler & Lybrand | <b>Date (month, day, year)</b><br>07/07/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 250.00                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Leon Batash<br>11 Queen Ann Drive<br><br>Deal NJ 07723                          | <b>Name of Employer</b><br><br><b>Occupation</b>    | <b>Date (month, day, year)</b><br>07/07/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 250.00                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Sitt<br>449 Avenue T<br><br>Brooklyn NY 11223                            | <b>Name of Employer</b><br>Ashley Stewart           | <b>Date (month, day, year)</b><br>07/07/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2000.00                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Theodore Tawil<br>618 Avenue K<br><br>Brooklyn NY 11230                         | <b>Name of Employer</b><br>Tawil Associates, Inc.   | <b>Date (month, day, year)</b><br>07/07/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 250.00                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jacob Weichholz<br>839 Fluke Street<br><br>Woodmere NY 11588                    | <b>Name of Employer</b><br><br><b>Occupation</b>    | <b>Date (month, day, year)</b><br>07/07/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 250.00                  |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                      |                                                     |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                            |                                                     |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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## NAME OF COMMITTEE (in Full)

Dear for Congress Inc.

|                                                                                                                                               |                                                                                      |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Robert Lichtschein<br>1083 East 17th Street<br><br>Brooklyn NY 11230                   | <b>Name of Employer</b><br><br><b>Occupation</b>                                     | <b>Date (month, day, year)</b><br>07/08/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 675.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Philip Ori<br>1901 Kings Highway<br><br>Brooklyn NY 11228                              | <b>Name of Employer</b><br><br><b>Occupation</b>                                     | <b>Date (month, day, year)</b><br>07/08/1998 | <b>Amount of Each Receipt this Period</b><br>360.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 360.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Daniel Retter<br>4835 Douglas Avenue<br><br>Bronx NY 10471                             | <b>Name of Employer</b><br>self-employed<br><br><b>Occupation</b><br>Attorney        | <b>Date (month, day, year)</b><br>07/08/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Luisa Knoll<br>319 Hooper Street<br><br>Brooklyn NY 11211                             | <b>Name of Employer</b><br>self-employed<br><br><b>Occupation</b><br>homemaker       | <b>Date (month, day, year)</b><br>07/08/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Yessie Knoll<br>319 Hooper Street<br><br>Brooklyn NY 11211                             | <b>Name of Employer</b><br>G.K.W. Realty Company<br><br><b>Occupation</b><br>Partner | <b>Date (month, day, year)</b><br>07/08/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ben Rottenstein<br>1075 Ocean Parkway<br>Apt. 8C<br>Brooklyn NY 11230                  | <b>Name of Employer</b><br><br><b>Occupation</b>                                     | <b>Date (month, day, year)</b><br>07/08/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Eli Cohen<br>3515 Bedford Avenue<br><br>Brooklyn NY 11210                              | <b>Name of Employer</b><br><br><b>Occupation</b>                                     | <b>Date (month, day, year)</b><br>07/08/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                           |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                      |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                      |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                                      |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Melr Cohen<br>West Street & West Houston Street<br><br>New York NY 10014               | <b>Name of Employer</b><br>Pler 4D Operating Co.<br><br><b>Occupation</b><br>President               | <b>Date (month, day, year)</b><br>07/08/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Sam Malamud<br>460 West 34th Street<br><br>New York NY 10001                           | <b>Name of Employer</b><br>Inter-Governmental Philatelic Corp.<br><br><b>Occupation</b><br>President | <b>Date (month, day, year)</b><br>07/09/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Abraham Berkowitz<br>1881 57th Street<br><br>Brooklyn NY 11204                         | <b>Name of Employer</b><br>Focus Camera, Inc.<br><br><b>Occupation</b><br>Executive                  | <b>Date (month, day, year)</b><br>07/09/1998 | <b>Amount of Each Receipt this Period</b><br>360.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 360.00                                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Sophia Pross<br>465 Utica Avenue<br><br>Brooklyn NY 11203                             | <b>Name of Employer</b><br>Utica Taxi Center<br><br><b>Occupation</b><br>Vice President              | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Stephen Rosedale<br>2675 Fair Oaks Lane<br><br>Cincinnati OH 45237                     | <b>Name of Employer</b><br>Communicato Health Services<br><br><b>Occupation</b><br>Executive         | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Beatrice Rosedale<br>2675 Fair Oaks Lane<br><br>Cincinnati OH 45237                   | <b>Name of Employer</b><br>self-employed<br><br><b>Occupation</b><br>Homemaker                       | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Labe Tyrenski<br>2115 Avenue K<br><br>Brooklyn NY 11210                                | <b>Name of Employer</b><br>Residential Management<br><br><b>Occupation</b><br>Executive              | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                           |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                                      |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                                      |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                                |                                                                                        |                                              |                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>AFL-CIO<br>1300 L Street NW<br><br>Washington DC 20005                                      | <b>Name of Employer</b><br><br><b>Occupation</b>                                       | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                             |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. David Sutton<br>1837 East 3rd Street<br><br>Brooklyn NY 11223                           | <b>Name of Employer</b><br>Bag Bazaar<br><br><b>Occupation</b><br>Executive            | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 500.00                                              |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Avraham Berger<br>2161 81st Street<br><br>Brooklyn NY 11214                             | <b>Name of Employer</b><br><br><b>Occupation</b>                                       | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 500.00                                              |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Elishu Soffer<br>1663 62nd Street<br><br>Brooklyn NY 11204                              | <b>Name of Employer</b><br>Quality Frozen Foods<br><br><b>Occupation</b><br>Executive  | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                             |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Elishu Soffer<br>1663 62nd Street<br><br>Brooklyn NY 11204                              | <b>Name of Employer</b><br>Quality Frozen Foods<br><br><b>Occupation</b><br>Executive  | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                             |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Reuven Wolf<br>4708 18th Avenue<br><br>Brooklyn NY 11204                                | <b>Name of Employer</b><br>Reed Properties, Inc.<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 500.00                                              |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Andrew Tisch<br>667 Madison Avenue<br><br>New York NY 10004                             | <b>Name of Employer</b><br>Lorus Corporation<br><br><b>Occupation</b><br>Executive     | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                             |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                        |                                                                                        |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                              |                                                                                        |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

7 / 65

FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                   |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Marvin Bienenfeld<br>39 West Beech Street<br><br>Long Beach NY 11561                   | <b>Name of Employer</b><br>Christian Dior         | <b>Date (month, day, year)</b><br>07/14/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                    | <b>Aggregate Year-to-Date</b> > \$ 250.00    |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Ernest Simo<br>9710 Windledge Drive<br><br>Dallas TX 75238                             | <b>Name of Employer</b><br>Enterprise 2000        | <b>Date (month, day, year)</b><br>07/14/1998 | <b>Amount of Each Receipt this Period</b><br>600.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Senior Executive             | <b>Aggregate Year-to-Date</b> > \$ 600.00    |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Kathleen Simo<br>9710 Windledge Drive<br><br>Dallas TX 75238                          | <b>Name of Employer</b><br>self-employed          | <b>Date (month, day, year)</b><br>07/14/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>homemaker                    | <b>Aggregate Year-to-Date</b> > \$ 500.00    |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jacob Marmurstein<br>33 2nd Avenue<br><br>Brooklyn NY 11215                            | <b>Name of Employer</b><br>Private Transportation | <b>Date (month, day, year)</b><br>07/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                    | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Rita Marmurstein<br>33rd 2nd Avenue<br><br>Brooklyn NY 11215                          | <b>Name of Employer</b>                           | <b>Date (month, day, year)</b><br>07/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Homemaker                    | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Yitchak Heger<br>3810 Bedford Avenue<br><br>Brooklyn NY 11228                          | <b>Name of Employer</b>                           | <b>Date (month, day, year)</b><br>07/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                                 | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs Maria Trovato<br>158-19 78th Street<br><br>Howard Beach NY 11414                       | <b>Name of Employer</b>                           | <b>Date (month, day, year)</b><br>07/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                                 | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                   |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                   |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

8 / 65

FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                        |                                                                          |                                       |                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------|
| Full Name, Mailing Address, and ZIP Code<br>Ms Estelle Mallard                                                                         | Name of Employer<br><br>Occupation                                       | Date (month, day, year)<br>07/14/1998 | Amount of Each Receipt this Period<br>1000.00                               |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1000.00                                      |                                       |                                                                             |
| Full Name, Mailing Address, and ZIP Code<br>Dr. Robert Matalon<br>187 3rd Avenue<br><br>New York NY 10003                              | Name of Employer<br>Self employed<br><br>Occupation<br>Doctor            | Date (month, day, year)<br>07/15/1998 | Amount of Each Receipt this Period<br>500.00                                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 500.00                                       |                                       |                                                                             |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Murray Plaut<br>28 Lord Avenue<br><br>Lawrence NY 11559                                | Name of Employer<br>S.C. & J. Foods, Inc.<br><br>Occupation<br>Executive | Date (month, day, year)<br>07/15/1998 | Amount of Each Receipt this Period<br>500.00                                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 500.00                                       |                                       |                                                                             |
| Full Name, Mailing Address, and ZIP Code<br>Ms Avigayel Lefkowitz<br>1812 49th Street<br><br>Brooklyn NY 11204                         | Name of Employer<br><br>Occupation<br>Student                            | Date (month, day, year)<br>07/15/1998 | Amount of Each Receipt this Period<br>1000.00                               |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1000.00                                      |                                       |                                                                             |
| Full Name, Mailing Address, and ZIP Code<br>Ms Simcha Lefkowitz<br>1812 49th Street<br><br>Brooklyn NY 11204                           | Name of Employer<br><br>Occupation<br>Student                            | Date (month, day, year)<br>07/15/1998 | Amount of Each Receipt this Period<br>1000.00                               |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1000.00                                      |                                       |                                                                             |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Abraham Lefkowitz<br>1515 55th Street<br><br>Brooklyn NY 11219                         | Name of Employer<br>Crystal Clear Industries<br><br>Occupation<br>CEO    | Date (month, day, year)<br>07/15/1998 | Amount of Each Receipt this Period<br>1000.00<br>First out son's first name |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1000.00                                      |                                       |                                                                             |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Aref Mouhaddeb<br>962 East 8th Street<br><br>Brooklyn NY 11230                         | Name of Employer<br>Fremada Gold, Inc.<br><br>Occupation<br>Executive    | Date (month, day, year)<br>07/15/1998 | Amount of Each Receipt this Period<br>250.00                                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 250.00                                       |                                       |                                                                             |
| SUBTOTALS of Receipts This Page (Optional)                                                                                             |                                                                          |                                       |                                                                             |
| TOTALS This Period (last page this line number only)                                                                                   |                                                                          |                                       |                                                                             |



| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                 |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | 9 / 65                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|-----------------------------------------------|
|                                                                                                                                                                                                                                                                                      |  |                                                                          |  | FOR LINE NUMBER<br>11A                                                        |                                               |
| 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. |  |                                                                          |  |                                                                               |                                               |
| <b>NAME OF COMMITTEE (in Full)</b><br>Dear for Congress Inc.                                                                                                                                                                                                                         |  |                                                                          |  |                                                                               |                                               |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Isaac Lamm<br>1270 East 22nd Street<br><br>Brooklyn NY 11210                                                                                                                                                                         |  | Name of Employer<br><br>Occupation                                       |  | Date (month, day, year)<br>07/15/1998                                         | Amount of Each Receipt this Period<br>300.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 300.00                                       |  |                                                                               |                                               |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Charles Herzka<br>3177 Bedford Avenue<br><br>Brooklyn NY 11210                                                                                                                                                                       |  | Name of Employer<br><br>Occupation                                       |  | Date (month, day, year)<br>07/15/1998                                         | Amount of Each Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                      |  |                                                                               |                                               |
| Full Name, Mailing Address, and ZIP Code<br>Ms Miriam Herzka<br>3177 Bedford Avenue<br><br>Brooklyn NY 11210                                                                                                                                                                         |  | Name of Employer<br><br>Occupation<br>Homemaker                          |  | Date (month, day, year)<br>07/15/1998                                         | Amount of Each Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                      |  |                                                                               |                                               |
| Full Name, Mailing Address, and ZIP Code<br>Mrs. Nina Kandov<br>112-01 Queens Blvd.<br><br>Forest Hills NY 11375                                                                                                                                                                     |  | Name of Employer<br><br>Occupation<br>Homemaker                          |  | Date (month, day, year)<br>07/15/1998                                         | Amount of Each Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                      |  |                                                                               |                                               |
| Full Name, Mailing Address, and ZIP Code<br>Ms Alexis Kandov<br>112-01 Queens Blvd.<br><br>Forest Hills NY 11375                                                                                                                                                                     |  | Name of Employer<br><br>Occupation<br>Student                            |  | Date (month, day, year)<br>07/15/1998                                         | Amount of Each Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                      |  |                                                                               |                                               |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Boris Kandov<br>40 Fleet Street<br><br>Forest Hills NY 11375                                                                                                                                                                         |  | Name of Employer<br>Bukharin Jewish World<br><br>Occupation<br>President |  | Date (month, day, year)<br>07/15/1998                                         | Amount of Each Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                      |  |                                                                               |                                               |
| Full Name, Mailing Address, and ZIP Code<br>Ms Violetta Kandov<br>112-01 Queens Blvd.<br><br>Forest Hills NY 11375                                                                                                                                                                   |  | Name of Employer<br><br>Occupation<br>Student                            |  | Date (month, day, year)<br>07/15/1998                                         | Amount of Each Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                      |  |                                                                               |                                               |
| <b>SUBTOTALS</b> of Receipts This Page (Optional) .....                                                                                                                                                                                                                              |  |                                                                          |  |                                                                               |                                               |
| <b>TOTALS</b> This Period (last page this line number only) .....                                                                                                                                                                                                                    |  |                                                                          |  |                                                                               |                                               |

**SCHEDULE A****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page**10 / 65****FOR LINE NUMBER  
11A1**

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**NAME OF COMMITTEE (in Full)**  
**Dear for Congress Inc.**

|                                                                                                                                               |                                                               |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Susanne Kandy<br>112-01 Queens Blvd.<br><br>Forest Hills NY 11375                      | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student   | <b>Date (month, day, year)</b><br>07/15/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Chiam Stern<br>1880 East 26th Street<br><br>Brooklyn NY 11229                          | <b>Name of Employer</b><br><br><b>Occupation</b>              | <b>Date (month, day, year)</b><br>07/15/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Margaret Stern<br>1880 East 26th Street<br><br>Brooklyn NY 11229                      | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker | <b>Date (month, day, year)</b><br>07/15/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Kimberly Murstein<br>820 Park Avenue Apt. 15 D<br><br>New York NY 10028                | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student   | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Martha Murstein<br>820 Park Avenue Apt. 15 D<br><br>New York NY 10028                  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Retired   | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joshua Schwartz<br>158 East 56th Street<br><br>Brooklyn NY 11238                       | <b>Name of Employer</b><br><br><b>Occupation</b>              | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>700.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 700.00                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Marina Schwartz<br>188 Barlow Drive<br><br>Brooklyn NY 11234                           | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>700.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 700.00                     |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                               |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                               |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

11/85

FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                                |                                                                                            |                                              |                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Zlita Yakubovich<br>1498 East 2nd Street<br><br>Brooklyn NY 11204                      | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                              | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>700.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 700.00                                                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Leo Yakubovich<br>1498 East 2nd Street<br><br>Brooklyn NY 11204                         | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                              | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>700.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 700.00                                                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Sam Schwartz<br>185 Barlow Drive<br><br>Brooklyn NY 11234                               | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                              | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>700.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 700.00                                                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Robert Schwartz<br>353 East 72nd Street<br><br>New York NY 10001                        | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                              | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>600.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 600.00                                                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Michael Haddad<br>619 Avenue J<br><br>Brooklyn NY 11230                                 | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                              | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Meilach Fastag<br>2610 Avenue L<br><br>Brooklyn NY 11210                                | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                              | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>300.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 300.00                                                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Conor McHughes<br>8120 FDR Drive<br><br>New York NY 10018                               | <b>Name of Employer</b><br>Byrne's Elegant Carriages<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 250.00                                                  |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                        |                                                                                            |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                              |                                                                                            |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

12/65

FOR LINE NUMBER  
11A1

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)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                            |                                              |                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. James Campbell<br>6120 FDR Drive<br><br>New York NY 10018                              | <b>Name of Employer</b><br>Byrne's Elegant Carriages<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>250.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                                  |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Paul Tournabeue<br>6120 FDR Drive<br><br>New York NY 10018                             | <b>Name of Employer</b><br>Byrne's Elegant Carriages<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>233.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 233.00                                                  |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Mario D'Angelo<br>6120 FDR Drive<br><br>New York NY 10018                              | <b>Name of Employer</b><br>Byrne's Elegant Carriages<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>233.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 233.00                                                  |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Sal Tornabeue<br>6120 FDR Drive<br><br>New York NY 10018                               | <b>Name of Employer</b><br>Byrne's Elegant Carriages<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>234.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 234.00                                                  |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joe Houragh<br>6120 FDR Drive<br><br>New York NY 10018                                 | <b>Name of Employer</b><br>Byrne's Elegant Carriages<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>234.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 234.00                                                  |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Tom Hennessey<br>6120 FDR Drive<br><br>New York NY                                     | <b>Name of Employer</b><br>Byrne's Elegant Carriages<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>233.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 233.00                                                  |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Tony Haugh<br>6120 FDR Drive<br><br>New York NY 10018                                  | <b>Name of Employer</b><br>Byrne's Elegant Carriages<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>233.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 233.00                                                  |                                              |                                                     |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                            |                                              |                                                     |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                            |                                              |                                                     |

**SCHEDULE A****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page**13 / 65****FOR LINE NUMBER  
11A1**

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**NAME OF COMMITTEE (In Full)**  
**Dear for Congress Inc.**

|                                                                                                                                               |                                                                                                    |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Tully Muller<br>4 Stuyvesant Oval<br><br>New York NY                                  | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Gershon Neumann<br>4 Stuyvesant Oval<br><br>New York NY 11237                          | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Michael Leah Muller<br>4 Stuyvesant Oval<br><br>New York NY 10009                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Avigail Muller<br>4 Stuyvesant Oval<br><br>New York NY                                 | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Sarah Elisheva Muller<br>4 Stuyvesant Oval<br><br>New York NY 10009                   | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Benjamin Joel Muller<br>4 Stuyvesant Oval<br><br>New York NY 10009                     | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Nina Neuman Muller<br>4 Stuyvesant Oval<br><br>New York NY 10009                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                    |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                                    |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                                    |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

14 / 65

FOR LINE NUMBER  
11A)

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                    |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Gershon Neumann<br>4 Stuyvesant Oval<br><br>New York NY 11237                         | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                      | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                         |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jerry Cooper<br>114 Harde Lane<br><br>Lawrence NY 11559                                | <b>Name of Employer</b><br>Green Bus Lines, Inc.                                   | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                                                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Pauline Sturman<br>114 Harde Lane<br><br>Lawrence NY 11559                            | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                      | <b>Date (month, day, year)</b><br>07/16/1998 | <b>Amount of Each Receipt this Period</b><br>750.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 750.00                                          |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Maureen Reisman<br>P.O. Box 840188<br><br>Oakland Gardens NY 11364                    | <b>Name of Employer</b><br><br><b>Occupation</b>                                   | <b>Date (month, day, year)</b><br>07/17/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                         |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Israel Rabinowitz<br>1381 East 21st Street<br><br>Brooklyn NY 11210                    | <b>Name of Employer</b><br>Park Overlook Hotel<br><br><b>Occupation</b><br>Manager | <b>Date (month, day, year)</b><br>07/17/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                          |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Tzvi Osher<br>4 Harvard Road<br><br>Woodmere NY 11596                                  | <b>Name of Employer</b><br>Paper Pro, Inc.                                         | <b>Date (month, day, year)</b><br>07/17/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                                                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Israel Braunstein<br>1836 Ocean Parkway<br><br>Brooklyn NY 11223                       | <b>Name of Employer</b><br>Romerovski Corp.                                        | <b>Date (month, day, year)</b><br>07/17/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                                                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                    |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                    |                                              |                                                      |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                 |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page              | <b>15 / 65</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------|----------------|
|                                                                                                                                                                                                                                                                                      |  |                                                                          |  | FOR LINE NUMBER<br><b>11A</b>                                                              |                |
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| <b>NAME OF COMMITTEE (in Full)</b><br><b>Dear for Congress Inc.</b>                                                                                                                                                                                                                  |  |                                                                          |  |                                                                                            |                |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Moshe Gordon<br>1594 East 10th Street<br><br>Brooklyn NY 11230                                                                                                                                                                       |  | Name of Employer<br>SC&J Foods, Inc.<br><br>Occupation<br>Executive      |  | Date (month, day, year)<br>07/17/1998<br><br>Amount of Each Receipt this Period<br>500.00  |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 500.00                                       |  |                                                                                            |                |
| Full Name, Mailing Address, and ZIP Code<br>Mrs. Mana Elders<br>22 Marlow Road<br><br>Valley Stream NY 11580                                                                                                                                                                         |  | Name of Employer<br>Green Bus Lines, Inc.<br><br>Occupation<br>Executive |  | Date (month, day, year)<br>07/17/1998<br><br>Amount of Each Receipt this Period<br>450.00  |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 450.00                                       |  |                                                                                            |                |
| Full Name, Mailing Address, and ZIP Code<br>Mrs. Claudia Buckner<br>100 Great Neck Road, Apt. 50<br><br>Great Neck NY 11024                                                                                                                                                          |  | Name of Employer<br><br><br>Occupation<br>Homemaker                      |  | Date (month, day, year)<br>07/17/1998<br><br>Amount of Each Receipt this Period<br>550.00  |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 550.00                                       |  |                                                                                            |                |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Moshe Zafir<br>935 Broadway<br><br>New York NY 10010                                                                                                                                                                                 |  | Name of Employer<br>Blue Spot, Inc.<br><br>Occupation<br>Executive       |  | Date (month, day, year)<br>07/20/1998<br><br>Amount of Each Receipt this Period<br>500.00  |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 500.00                                       |  |                                                                                            |                |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Selbert Foster<br>2739 88th Street<br><br>Brooklyn NY 11228                                                                                                                                                                          |  | Name of Employer<br><br><br>Occupation                                   |  | Date (month, day, year)<br>07/20/1998<br><br>Amount of Each Receipt this Period<br>1000.00 |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                      |  |                                                                                            |                |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Barry Hertz<br>1304 East 7th Street<br><br>Brooklyn NY 11230                                                                                                                                                                         |  | Name of Employer<br>Track Data Corp.<br><br>Occupation<br>President      |  | Date (month, day, year)<br>07/20/1998<br><br>Amount of Each Receipt this Period<br>500.00  |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 500.00                                       |  |                                                                                            |                |
| Full Name, Mailing Address, and ZIP Code<br>Mrs. Joan Hertz<br>1304 E. 7th Street<br><br>Brooklyn NY 11230                                                                                                                                                                           |  | Name of Employer<br><br><br>Occupation                                   |  | Date (month, day, year)<br>07/20/1998<br><br>Amount of Each Receipt this Period<br>500.00  |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                      |  |                                                                                            |                |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                              |  |                                                                          |  |                                                                                            |                |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                    |  |                                                                          |  |                                                                                            |                |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

16 / 65

FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                                                                                                                                                       |                                                                                                                       |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Solomon Bilsko<br>370 Silver Court<br><br>Woodmere NY 11598<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):          | <b>Name of Employer</b><br><br><b>Occupation</b><br>Doctor<br><b>Aggregate Year-to-Date</b> \$ 750.00                 | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Daniel Spitz<br>1987 Coney Island Avenue<br><br>Brooklyn NY 11230<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Name of Employer</b><br>The Orchard<br><b>Occupation</b><br>Owner<br><b>Aggregate Year-to-Date</b> \$ 500.00       | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Daniel Wohlgelemer<br>2130 Guthrie Drive<br><br>Los Angeles CA 90034<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> \$ 750.00                       | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Receipt this Period</b><br>750.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Robert Hartman<br>3451 West Glenlake Avenue<br><br>Chicago IL 60659<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br>Self-employed<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> \$ 1000.00 | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Debra Hartman<br>3451 West Glenlake Avenue<br><br>Chicago IL 60659<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker<br><b>Aggregate Year-to-Date</b> \$ 1000.00             | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. David Hartman<br>3451 West Glenlake Avenue<br><br>Chicago IL 60659<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student<br><b>Aggregate Year-to-Date</b> \$ 500.00                | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alan Fallos<br>2039 Ocean Parkway<br><br>Brooklyn NY 11223<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> \$ 1000.00                      | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                               |                                                                                                                       |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                     |                                                                                                                       |                                              |                                                      |



**SCHEDULE A****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page**17 / 65****FOR LINE NUMBER  
11A1**

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**NAME OF COMMITTEE (in Full)**  
**Dear for Congress Inc.**

|                                                                                                                                               |                                                                                            |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ed Sutton<br>1407 Broadway<br><br>New York NY 10018                                    | <b>Name of Employer</b><br>Sutton Investments Ltd.<br><br><b>Occupation</b><br>Owner       | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Israel Salomon<br>1627 50th Street<br><br>Brooklyn NY 11204                            | <b>Name of Employer</b><br>Samuel-Blima Homes<br><br><b>Occupation</b><br>Homebuilder      | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alan Jemal<br>1696 East 55th Street<br><br>Brooklyn NY 11223                           | <b>Name of Employer</b><br>Jemway Realty Management<br><br><b>Occupation</b><br>Executive  | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>300.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 700.00                                                  |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Shimon Flischman<br>1481 47th Street<br><br>Brooklyn NY 11210                          | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Retired                            | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Rubin Goldkang<br>1481 47th Street<br><br>Brooklyn NY 11219                            | <b>Name of Employer</b><br><br><br><b>Occupation</b>                                       | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Stephen Ross<br>625 Madison Avenue<br><br>New York NY 10022                            | <b>Name of Employer</b><br>The Related Companies, LP<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Samuel Schiller<br>202 Private Way<br><br>Lakewood NJ 08701                            | <b>Name of Employer</b><br><br><br><b>Occupation</b>                                       | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                 |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                            |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                            |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

18 / 65

FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                                |                                                                                      |                                              |                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Mordechai Minzer<br>907 48th Street<br><br>Brooklyn NY 11219                            | <b>Name of Employer</b><br>Minzer's Optical, Inc.<br><br><b>Occupation</b><br>Doctor | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 500.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. David Piromballo<br>1239 Tabor Court<br><br>Brooklyn NY 11219                           | <b>Name of Employer</b><br>Strickly Car Service<br><br><b>Occupation</b><br>Manager  | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 500.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Allen Bodner<br>One Whitehall Street<br><br>New York NY 10004                           | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Investor                     | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                           |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Harvey Greenfield<br>28 Pleasant Avenue<br><br>Passaic NJ 07055                         | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Retired                      | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 250.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Chaim Komendant<br>56 Idaho Street<br><br>Passaic NJ 07055                              | <b>Name of Employer</b><br><br><br><b>Occupation</b>                                 | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 250.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Stephen Eagar<br>484 Dogwood Lane<br><br>Plandome NY 11030                              | <b>Name of Employer</b><br><br><br><b>Occupation</b>                                 | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>750.00  |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1500.00                                           |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Anne Eagar<br>18 Kaywood Road<br><br>Port Washington NY 11060                          | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Homemaker                    | <b>Date (month, day, year)</b><br>07/21/1998 | <b>Amount of Each Receipt this Period</b><br>450.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 450.00                                            |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                        |                                                                                      |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                              |                                                                                      |                                              |                                                      |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                |  | 19 / 65                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------|--|------------------------------------------------------|
|                                                                                                                                                                                                                                                                                      |  | Use separate schedule(s) for each category of the Detailed Summary Page |  | FOR LINE NUMBER<br>11A1                              |
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| <b>NAME OF COMMITTEE (In Full)</b><br>Dear for Congress Inc.                                                                                                                                                                                                                         |  |                                                                         |  |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jacob Feuerstein<br>2818 Avenue K<br><br>Brooklyn NY 11210                                                                                                                                                                    |  | <b>Name of Employer</b><br>Classic Kosher Catering                      |  | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>Manager                                            |  |                                                      |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                              |  |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Helan Feuerstein<br>2818 Avenue K<br><br>Brooklyn NY 11210                                                                                                                                                                   |  | <b>Name of Employer</b><br><br>                                         |  | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>Homemaker                                          |  |                                                      |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                              |  |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Steven Mann<br>78-19 Rockaway Blvd<br><br>Woodhaven NY 11421                                                                                                                                                                  |  | <b>Name of Employer</b><br>Dial A Ride Car Service                      |  | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>Manager                                            |  |                                                      |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                              |  |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Abba Stubenhaus<br>1718 Avenue K<br><br>Brooklyn NY 11230                                                                                                                                                                     |  | <b>Name of Employer</b><br><br>                                         |  | <b>Amount of Each Receipt this Period</b><br>25.00   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>Retired                                            |  |                                                      |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregate Year-to-Date</b> > \$ 25.00                                |  |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Kenneth Cory<br>3475 Auburn Folsom Road<br><br>Loomis CA 95650                                                                                                                                                                |  | <b>Name of Employer</b><br>Castle Harlan Inc.                           |  | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>Executive                                          |  |                                                      |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                              |  |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Shaya Boymelgreen<br>1288 President Street<br><br>Brooklyn NY 11213                                                                                                                                                            |  | <b>Name of Employer</b><br>Self-employed                                |  | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>CEO                                                |  |                                                      |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregate Year-to-Date</b> > \$ 2000.00                              |  |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ezra Blumberg<br>515 Avenue I<br><br>Brooklyn NY 11230                                                                                                                                                                            |  | <b>Name of Employer</b><br>Pond Equines                                 |  | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br><br>                                               |  |                                                      |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                              |  |                                                      |
| <b>SUBTOTALS</b> of Receipts This Page (Optional) .....                                                                                                                                                                                                                              |  |                                                                         |  |                                                      |
| <b>TOTALS</b> This Period (last page this line number only) .....                                                                                                                                                                                                                    |  |                                                                         |  |                                                      |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                                                                                      |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | <b>20 / 65</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|----------------|
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| <b>NAME OF COMMITTEE (in Full)</b><br>Dear for Congress Inc.                                                                                                                                                                                                                         |  |                                                                                                                                               |  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Isaac Franco<br>1937 Ocean Parkway<br><br>Brooklyn NY 11223                                                                                                                                                                   |  | <b>Name of Employer</b><br><br><b>Occupation</b>                                                                                              |  | <b>Date (month, day, year)</b><br>07/23/1998                                  |                |
| <b>Amount of Each Receipt this Period</b><br>500.00                                                                                                                                                                                                                                  |  | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                    |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Ora Franco<br>1937 Ocean Parkway<br><br>Brooklyn NY 11223                                                                                                                                                                    |  | <b>Name of Employer</b><br><br><b>Occupation</b>                                                                                              |  | <b>Date (month, day, year)</b><br>07/23/1998                                  |                |
| <b>Amount of Each Receipt this Period</b><br>500.00                                                                                                                                                                                                                                  |  | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                    |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Judy Zborowski<br>385 Barrett Road<br><br>Lawrence NY 11559                                                                                                                                                                  |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                                                                                 |  | <b>Date (month, day, year)</b><br>07/23/1998                                  |                |
| <b>Amount of Each Receipt this Period</b><br>1000.00                                                                                                                                                                                                                                 |  | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                    |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Yerushalmi<br>157 West Shore Road<br><br>Great Neck NY 11024                                                                                                                                                           |  | <b>Name of Employer</b><br>Yerushalmi & Associates LLP<br><br><b>Occupation</b><br>Attorney                                                   |  | <b>Date (month, day, year)</b><br>07/23/1998                                  |                |
| <b>Amount of Each Receipt this Period</b><br>1000.00                                                                                                                                                                                                                                 |  | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                    |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Malka Yerushalmi<br>157 West Shore Road<br><br>Great Neck NY 11024                                                                                                                                                           |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                                                                                 |  | <b>Date (month, day, year)</b><br>07/23/1998                                  |                |
| <b>Amount of Each Receipt this Period</b><br>1000.00                                                                                                                                                                                                                                 |  | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                    |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Andrew Brettschnider<br>2 Winding Brook Drive<br><br>Larchmont NY 10538                                                                                                                                                       |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student                                                                                   |  | <b>Date (month, day, year)</b><br>07/24/1998                                  |                |
| <b>Amount of Each Receipt this Period</b><br>1000.00                                                                                                                                                                                                                                 |  | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                    |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Allison Brettschnider<br>2 Winding Brook Drive<br><br>Larchmont NY 10538                                                                                                                                                      |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student                                                                                   |  | <b>Date (month, day, year)</b><br>07/24/1998                                  |                |
| <b>Amount of Each Receipt this Period</b><br>500.00                                                                                                                                                                                                                                  |  | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ 500.00                                     |                |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                              |  |                                                                                                                                               |  |                                                                               |                |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                    |  |                                                                                                                                               |  |                                                                               |                |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

## Full Name, Mailing Address, and ZIP Code

Mr. Michael Abraham  
70 Lawrence Avenue

Deal NJ 07723

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

## Name of Employer

Wanted Shoes, Inc

## Occupation

Executive

Date (month,  
day, year)

07/24/1998

Amount of Each  
Receipt this Period  
500.00

Aggregate Year-to-Date > \$ 500.00

## Full Name, Mailing Address, and ZIP Code

Mrs. Doris Drantch  
105-25 147h Avenue

Jamaica NY 11434

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

## Name of Employer

Green Bus Lines

## Occupation

Vice President

Date (month,  
day, year)

07/27/1998

Amount of Each  
Receipt this Period  
550.00

Aggregate Year-to-Date > \$ 1550.00

## Full Name, Mailing Address, and ZIP Code

Mr. Peter Setteducato  
188 Bahila Street

Staten Island NY 10312

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

## Name of Employer

## Occupation

Date (month,  
day, year)

07/27/1998

Amount of Each  
Receipt this Period  
500.00

Aggregate Year-to-Date > \$ 500.00

## Full Name, Mailing Address, and ZIP Code

Mr. Nicholas Deleagio  
5320 Arthur Kill Road

Staten Island NY 10307

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

## Name of Employer

## Occupation

Date (month,  
day, year)

07/27/1998

Amount of Each  
Receipt this Period  
500.00

Aggregate Year-to-Date > \$ 500.00

## Full Name, Mailing Address, and ZIP Code

Mr. Solomon Tropper  
1102 East 28th Street

Brooklyn NY 11210

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

## Name of Employer

Centra Nation

## Occupation

Executive

Date (month,  
day, year)

07/27/1998

Amount of Each  
Receipt this Period  
250.00

Aggregate Year-to-Date > \$ 250.00

## Full Name, Mailing Address, and ZIP Code

Dr. Howard Rubin  
P.O. Box 387

Pound Ridge NY 10575

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

## Name of Employer

Self-Employed

## Occupation

Doctor

Date (month,  
day, year)

07/27/1998

Amount of Each  
Receipt this Period  
1000.00

Aggregate Year-to-Date > \$ 1000.00

## Full Name, Mailing Address, and ZIP Code

Mrs. Susan Rubin  
P.O. Box 387

Pound Ridge NY 10575

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

## Name of Employer

## Occupation

Homemaker

Date (month,  
day, year)

07/27/1998

Amount of Each  
Receipt this Period  
1000.00

Aggregate Year-to-Date > \$ 1000.00

SUBTOTALS of Receipts This Page (Optional) .....

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

# SCHEDULE A

# ITEMIZED RECEIPTS

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

22 / 65

FOR LINE NUMBER  
11A1

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)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                                 |                                              |                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Allan Genauer<br>400 North Las Genauer<br><br>Vernon CA 90058                          | <b>Name of Employer</b><br>Allied Enterprises<br><br><b>Occupation</b><br>Executive             | <b>Date (month, day, year)</b><br>07/27/1998 | <b>Amount of Each Receipt this Period</b><br>250.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                                       |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joel Cohen<br>1008 8th Avenue<br><br>New York NY 10018                                 | <b>Name of Employer</b><br>M&J Training Co. Inc.<br><br><b>Occupation</b><br>Executive          | <b>Date (month, day, year)</b><br>07/27/1998 | <b>Amount of Each Receipt this Period</b><br>250.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                                       |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Chaim Fortgang<br>2319 Avenue M<br><br>Brooklyn NY 11210                               | <b>Name of Employer</b><br>Washelli Linton<br><br><b>Occupation</b><br>Attorney                 | <b>Date (month, day, year)</b><br>07/27/1998 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                       |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Berliner<br>1350 East 13th Street<br><br>Brooklyn NY 11230                      | <b>Name of Employer</b><br><br><br><b>Occupation</b>                                            | <b>Date (month, day, year)</b><br>07/27/1998 | <b>Amount of Each Receipt this Period</b><br>300.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                       |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jack Shammah<br>1220 Broadway<br><br>New York NY 10001                                 | <b>Name of Employer</b><br>Best Silver Inc.<br><br><b>Occupation</b><br>Executive               | <b>Date (month, day, year)</b><br>07/27/1998 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                       |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Benjamin Gelbtuch<br>4900 Blackstone Avenue<br><br>Riverdale NY 10471                  | <b>Name of Employer</b><br>Day-Mar Medical Products<br><br><b>Occupation</b><br>President & CEO | <b>Date (month, day, year)</b><br>07/27/1998 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                       |                                              |                                                     |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Scalice<br>5 Coach Drive East<br><br>Hazel NY 07730                             | <b>Name of Employer</b><br>Village Car Service<br><br><b>Occupation</b><br>Manager              | <b>Date (month, day, year)</b><br>07/27/1998 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                       |                                              |                                                     |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                                 |                                              |                                                     |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                                 |                                              |                                                     |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                                 |  | Use separate sched. A(s)<br>for each category of the<br>Detailed Summary Page | 23 / 65                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|------------------------------------------------------|
|                                                                                                                                                                                                                                                                                      |  |                                                                                          |  | FOR LINE NUMBER<br>11A                                                        |                                                      |
| 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. |  |                                                                                          |  |                                                                               |                                                      |
| <b>NAME OF COMMITTEE (in Full)</b><br>Dear for Congress Inc.                                                                                                                                                                                                                         |  |                                                                                          |  |                                                                               |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Frank Scalise<br>21 Algonquin Road<br><br>Holmdel NJ 07733                                                                                                                                                                    |  | <b>Name of Employer</b><br><br><b>Occupation</b>                                         |  | <b>Date (month, day, year)</b><br>07/27/1998                                  | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                |  |                                                                               |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Avram Feldman<br>1371 Coney Island Avenue<br><br>Brooklyn NY 11230                                                                                                                                                            |  | <b>Name of Employer</b><br><br><b>Occupation</b>                                         |  | <b>Date (month, day, year)</b><br>07/28/1998                                  | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                |  |                                                                               |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Shimon Betram<br>1371 Coney Island Avenue<br><br>Brooklyn NY 11230                                                                                                                                                            |  | <b>Name of Employer</b><br><br><b>Occupation</b>                                         |  | <b>Date (month, day, year)</b><br>07/28/1998                                  | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                |  |                                                                               |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Murray Forman<br>291 Ocean Avenue<br><br>Lawrence NY 11569                                                                                                                                                                    |  | <b>Name of Employer</b><br>Continuum Capital, Inc.<br><br><b>Occupation</b><br>Executive |  | <b>Date (month, day, year)</b><br>07/28/1998                                  | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                               |  |                                                                               |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Avi Nakash<br>140 Beach 143rd Street<br><br>Belle Harbor NY 11034                                                                                                                                                             |  | <b>Name of Employer</b><br>Jordache Limited<br><br><b>Occupation</b><br>Executive        |  | <b>Date (month, day, year)</b><br>07/29/1998                                  | <b>Amount of Each Receipt this Period</b><br>666.67  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregate Year-to-Date</b> > \$ 666.67                                                |  |                                                                               |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Shaul Nakash<br>135 Beach 145th Street<br><br>Neponset NY 11694                                                                                                                                                               |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student                              |  | <b>Date (month, day, year)</b><br>07/29/1998                                  | <b>Amount of Each Receipt this Period</b><br>666.67  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregate Year-to-Date</b> > \$ 666.67                                                |  |                                                                               |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Steven Nakash<br>146-05 Rockaway Beach Blvd.<br><br>Belle Harbor NY 11034                                                                                                                                                     |  | <b>Name of Employer</b><br>Jordache Limited<br><br><b>Occupation</b><br>Executive        |  | <b>Date (month, day, year)</b><br>07/29/1998                                  | <b>Amount of Each Receipt this Period</b><br>666.67  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregate Year-to-Date</b> > \$ 666.67                                                |  |                                                                               |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                              |  |                                                                                          |  |                                                                               |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                    |  |                                                                                          |  |                                                                               |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                                                                                |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Santo Petroselli<br>12-12 43rd Avenue<br><br>Long Island City NY 11101                 | <b>Name of Employer</b><br>Petroselli Electric Company<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                                |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Abraham Flisoff<br>1238 East 22nd Street<br><br>Brooklyn NY 11210                      | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> > \$ 500.00                                      | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                                |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Abraham Kassin<br>485 Avenue T<br><br>Brooklyn NY 11223                                | <b>Name of Employer</b><br>Collegeware USA<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 250.00              | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                                |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Chaim Gelbfish<br>2502 Avenue I<br><br>Brooklyn NY 11210                               | <b>Name of Employer</b><br>Self-Employed<br><br><b>Occupation</b><br>Doctor<br><br><b>Aggregate Year-to-Date</b> > \$ 500.00                   | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                                |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jack Friedman<br>129 Audley Street<br><br>Kew Gardens NY 11418                         | <b>Name of Employer</b><br>Franklin Nursing Home<br><br><b>Occupation</b><br>President<br><br><b>Aggregate Year-to-Date</b> > \$ 2000.00       | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                                |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alan Gelband<br>575 Madison Avenue<br><br>New York NY 10022                            | <b>Name of Employer</b><br>Alan Gelband Company<br><br><b>Occupation</b><br>Investment Banker<br><br><b>Aggregate Year-to-Date</b> > \$ 500.00 | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                                |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Norman Shapiro<br>83 The Circle<br><br>Passaic NJ 07055                                | <b>Name of Employer</b><br>Network Resources, Inc.<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 250.00      | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                                |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                                                                                |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                                                                                |                                              |                                                      |



# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                      |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Gary Epstein<br>4429 Post Avenue<br><br>Miami Beach FL 33140                           | <b>Name of Employer</b><br>Greenberg and Traug       | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                        |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 500.00                                                                                                     |                                                      |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Richard Salamone<br>1485 Hylan Blvd.<br><br>Staten Island NY 10305                     | <b>Name of Employer</b><br>Community Car Service     | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                       |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                                                                    |                                                      |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jack Zwick<br>551 5th Avenue<br><br>New York NY 10176                                  | <b>Name of Employer</b><br>Weiss and Younman         | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                        |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 500.00                                                                                                     |                                                      |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Weiss<br>551 5th Avenue<br><br>New York NY 10176                                | <b>Name of Employer</b><br>Weiss and Younman         | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                        |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 500.00                                                                                                     |                                                      |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Boruch Harrar<br>910 Avenue P<br><br>Brooklyn NY 11223                                 | <b>Name of Employer</b><br>Paradise Mattress Company | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                       |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 500.00                                                                                                     |                                                      |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Reuben Blumenthal<br>512 Woodmere Boulevard<br><br>Woodmere NY 11590                   | <b>Name of Employer</b><br>self employed             | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>640.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                                    |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                                                                    |                                                      |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ivan Kaufman<br>393 Earle Ovington Blvd.<br>9th Floor<br>Unkondele NY 11553            | <b>Name of Employer</b><br>Arthur National           | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                       |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 2000.00                                                                                                    |                                                      |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                             |                                                      |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                                   |                                                      |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER  
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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                     |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ivan Kaufman<br>333 Earle Ovington Blvd.<br>9th Floor<br>Uniondale NY 11553            | <b>Name of Employer</b><br>Arco National            | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                      | <b>Aggregate Year-to-Date</b> > \$ 2000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Decorde Odeltz<br>2378 80th Street<br>Brooklyn NY 11204                                | <b>Name of Employer</b><br>Jo-Zai Sales Inc         | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                      | <b>Aggregate Year-to-Date</b> > \$ 500.00    |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Mark Adler<br>10 Herrick Drive<br>Lawrence NY 11550                                    | <b>Name of Employer</b><br>Mount Vernon Hospital    | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Doctor                         | <b>Aggregate Year-to-Date</b> > \$ 500.00    |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. David Friedman<br>450 Raritan Center Parkway<br>Edison NJ 08837                        | <b>Name of Employer</b><br>Continental Cosmétique   | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                      | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Adam Shaw<br>175 West 73rd Street<br>Apt. 7 K<br>New York NY 10023                     | <b>Name of Employer</b><br>Hughes, Hubbard and Reed | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                       | <b>Aggregate Year-to-Date</b> > \$ 500.00    |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Stanley Cayre<br>16 East 40th Street<br>New York NY 10016                              | <b>Name of Employer</b><br>Good Time Home Video     | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>350.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Manager                        | <b>Aggregate Year-to-Date</b> > \$ 350.00    |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Cheryl Herzka<br>3177 Bedford Avenue<br>Brooklyn NY 11210                               | <b>Name of Employer</b>                             | <b>Date (month, day, year)</b><br>07/30/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Homemaker                      | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                             |                                                     |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                                   |                                                     |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                     |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. David Diamond<br>473 West End Avenue<br><br>New York NY 10024                          | <b>Name of Employer</b><br>Self-employed            | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Doctor                         |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 500.00                                                                                                     |                                                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. David Hedaya<br>902 Avenue K<br><br>Brooklyn NY 11230                                  | <b>Name of Employer</b>                             | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                                   |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 500.00                                                                                                     |                                                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Robert Hedaya<br>1 East 33rd Street<br>12th Floor<br>New York NY 10016                 | <b>Name of Employer</b><br>Capella Handbags         | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                      |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 500.00                                                                                                     |                                                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Israel Jacobowitz<br>9921 4th Avenue Apt. 41<br><br>Brooklyn NY 11209                  | <b>Name of Employer</b><br>Self-employed            | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Cardiac Surgeon                |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                                                                    |                                                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Michael Zimet<br>3900 Manhattan College Parkway<br><br>Riverdale NY 10471              | <b>Name of Employer</b><br>Mike Zimet Enterprises   | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>200.00  |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>President                      |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 1200.00                                                                                                    |                                                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alan Jamal<br>1886 East 59th Street<br><br>Brooklyn NY 11233                           | <b>Name of Employer</b><br>Jemway Realty Management | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>400.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                      |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 700.00                                                                                                     |                                                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Charles Knoll<br>52 Crescent Avenue<br><br>Passaic NJ 07655                            | <b>Name of Employer</b><br>Self-Employed            | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>360.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Doctor                         |                                              |                                                      |
| <b>Aggregate Year-to-Date</b> > \$ 360.00                                                                                                     |                                                     |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                     |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                     |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                                                                    |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Darryl Hagler<br>12 Dika Drive<br>Wesley Hills NY 10052                                | <b>Name of Employer</b><br>Ankler and Company<br><br><b>Occupation</b><br>Executive<br><b>Aggregate Year-to-Date</b> > \$ 500.00   | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Neuhman<br>39 Broadway<br>New York NY 10035                                     | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student<br><b>Aggregate Year-to-Date</b> > \$ 1000.00                          | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Rachel Neumann<br>39 Broadway<br>New York NY 10005                                     | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student<br><b>Aggregate Year-to-Date</b> > \$ 1000.00                          | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Nechama Neumann<br>39 Broadway<br>New York NY 10005                                    | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student<br><b>Aggregate Year-to-Date</b> > \$ 1000.00                          | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Thomas D'Ambrosio<br>96-16 Metropolitan Avenue<br>Forest Hills NY 11375                | <b>Name of Employer</b><br>Four Ones Car Service<br><br><b>Occupation</b><br>Manager<br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>300.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Thomas D'Ambrosio<br>96-16 Metropolitan Avenue<br>Forest Hills NY 11375                | <b>Name of Employer</b><br>Four Ones Car Service<br><br><b>Occupation</b><br>Manager<br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>700.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Isaac Goldstein<br>582 Bedford Avenue<br>Brooklyn NY 11211                             | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                                 | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                                                                                                                    |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                                                                    |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                                                                    |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                               |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Harry Klein<br>26 Court Street<br><br>Brooklyn NY 11242                                | <b>Name of Employer</b><br>Self-employed      | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>360.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                 | <b>Aggregate Year-to-Date</b> \$ 360.00      |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Henry Schneider<br>116 East 30th Street<br><br>New York NY 10016                       | <b>Name of Employer</b>                       | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                             | <b>Aggregate Year-to-Date</b> \$ 1000.00     |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Sam Brody                                                                              | <b>Name of Employer</b>                       | <b>Date (month, day, year)</b><br>08/03/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                             | <b>Aggregate Year-to-Date</b> \$ 1000.00     |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Marie Louise Tannielio<br>40 Fulton Street<br><br>New York NY 10038                    | <b>Name of Employer</b><br>Self-employed      | <b>Date (month, day, year)</b><br>08/03/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                 | <b>Aggregate Year-to-Date</b> \$ 1000.00     |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Allan Zetkovic<br>1150 Park Avenue<br><br>New York NY 10128                            | <b>Name of Employer</b>                       | <b>Date (month, day, year)</b><br>08/03/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                             | <b>Aggregate Year-to-Date</b> \$ 1000.00     |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Israel Englander<br>111 Broadway<br><br>New York NY 10008                              | <b>Name of Employer</b>                       | <b>Date (month, day, year)</b><br>08/03/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                             | <b>Aggregate Year-to-Date</b> \$ 500.00      |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Morris Hiday<br>1130 East 7th Street<br><br>Brooklyn NY 11230                          | <b>Name of Employer</b><br>NY Holiday Company | <b>Date (month, day, year)</b><br>08/03/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Designer                 | <b>Aggregate Year-to-Date</b> \$ 250.00      |                                                      |

**SUBTOTALS** of Receipts This Page (Optional)

**TOTALS** This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

Use separate schedule(s)  
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## NAME OF COMMITTEE (in Full)

Dear for Congress Inc.

### Full Name, Mailing Address, and ZIP Code

Mr. David Ganziger  
1063 East 24th Street

Brooklyn NY 11216

Name of Employer

Date (month,  
day, year)  
08/03/1998

Amount of Each  
Receipt this Period  
500.00

Occupation

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

Aggregate Year-to-Date > \$ 500.00

### Full Name, Mailing Address, and ZIP Code

Mr. Kenneth Rosen  
155 Lafayette Avenue

Passaic NJ 07055

Name of Employer

Date (month,  
day, year)  
08/03/1998

Amount of Each  
Receipt this Period  
250.00

Occupation

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

Aggregate Year-to-Date > \$ 250.00

### Full Name, Mailing Address, and ZIP Code

Mr. Joseph Stella  
1138 South Railroad Avenue

Staten Island NY 10306

Name of Employer

Grant City Transportation

Date (month,  
day, year)  
08/03/1998

Amount of Each  
Receipt this Period  
500.00

Occupation

Executive

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

Aggregate Year-to-Date > \$ 500.00

### Full Name, Mailing Address, and ZIP Code

Mr. Michael Schick  
50 Broadway

Lawrence NY 11559

Name of Employer

A and D Catering Corp.

Date (month,  
day, year)  
08/04/1998

Amount of Each  
Receipt this Period  
500.00

Occupation

Executive

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

Aggregate Year-to-Date > \$ 500.00

### Full Name, Mailing Address, and ZIP Code

Mr. Allen Kaplan  
5 Ridge Drive East

Great Neck NY 11021

Name of Employer

Date (month,  
day, year)  
08/04/1998

Amount of Each  
Receipt this Period  
1000.00

Occupation

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

Aggregate Year-to-Date > \$ 1000.00

### Full Name, Mailing Address, and ZIP Code

Mr. Sidney Jacobs  
54 Juniper Road

Port Washington NY 11060

Name of Employer

Date (month,  
day, year)  
08/04/1998

Amount of Each  
Receipt this Period  
1000.00

Occupation

Homemaker

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

Aggregate Year-to-Date > \$ 1000.00

### Full Name, Mailing Address, and ZIP Code

Mrs. Nathalie Strauel  
Jingle Lane

Bedford NY 10506

Name of Employer

Date (month,  
day, year)  
08/04/1998

Amount of Each  
Receipt this Period  
1000.00

Occupation

Homemaker

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

Aggregate Year-to-Date > \$ 1000.00

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                |  | <b>ITEMIZED RECEIPTS</b>                                                        |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | 31 / 65 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|---------|
|                                                                                                                                                                                                                                                                                  |  |                                                                                 |  | FOR LINE NUMBER<br>11A)                                                       |         |
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| <b>NAME OF COMMITTEE (in Full)</b><br><b>Dear for Congress Inc.</b>                                                                                                                                                                                                              |  |                                                                                 |  |                                                                               |         |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Martin Rosenman<br>3 Chestnut Drive<br><br>Great Neck NY 11021                                                                                                                                                            |  | <b>Name of Employer</b><br><br>Retired                                          |  | <b>Date (month, day, year)</b><br>08/04/1998                                  |         |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                    |  | <b>Aggregating Year-to-Date</b> > \$ 1000.00                                    |  | <b>Amount of Each Receipt this Period</b><br>1000.00                          |         |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Theodore A. Strauel<br>24-18 Bridge Plaza South<br><br>Long Island City NY 11101                                                                                                                                          |  | <b>Name of Employer</b><br>Metropolitan Taxicab Board of Trade<br><br>President |  | <b>Date (month, day, year)</b><br>08/04/1998                                  |         |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                    |  | <b>Aggregating Year-to-Date</b> > \$ 1000.00                                    |  | <b>Amount of Each Receipt this Period</b><br>1000.00                          |         |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Mark Claster<br>One Hummingbird Drive<br><br>Roslyn NY 11576                                                                                                                                                              |  | <b>Name of Employer</b><br><br>Occupation                                       |  | <b>Date (month, day, year)</b><br>08/04/1998                                  |         |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                    |  | <b>Aggregating Year-to-Date</b> > \$ 1000.00                                    |  | <b>Amount of Each Receipt this Period</b><br>1000.00                          |         |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Mary Harris                                                                                                                                                                                                                |  | <b>Name of Employer</b><br><br>Occupation                                       |  | <b>Date (month, day, year)</b><br>08/04/1998                                  |         |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                    |  | <b>Aggregating Year-to-Date</b> > \$ 1000.00                                    |  | <b>Amount of Each Receipt this Period</b><br>1000.00                          |         |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Kevin Healy                                                                                                                                                                                                               |  | <b>Name of Employer</b><br><br>Occupation                                       |  | <b>Date (month, day, year)</b><br>08/04/1998                                  |         |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                    |  | <b>Aggregating Year-to-Date</b> > \$ 500.00                                     |  | <b>Amount of Each Receipt this Period</b><br>500.00                           |         |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Stanley Wissak<br>100 West 89th Street Apt. 9H<br><br>Manhattan NY 10024                                                                                                                                                  |  | <b>Name of Employer</b><br><br>Occupation                                       |  | <b>Date (month, day, year)</b><br>08/04/1998                                  |         |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                    |  | <b>Aggregating Year-to-Date</b> > \$ 1000.00                                    |  | <b>Amount of Each Receipt this Period</b><br>1000.00                          |         |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Helen Wissak<br>100 West 89th Street Apt. 9H<br><br>Manhattan NY 10024                                                                                                                                                   |  | <b>Name of Employer</b><br><br>Occupation<br>Homemaker                          |  | <b>Date (month, day, year)</b><br>08/04/1998                                  |         |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                    |  | <b>Aggregating Year-to-Date</b> > \$ 1000.00                                    |  | <b>Amount of Each Receipt this Period</b><br>1000.00                          |         |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                          |  |                                                                                 |  |                                                                               |         |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                |  |                                                                                 |  |                                                                               |         |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                     |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | <b>32 / 65</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------|--|-------------------------------------------------------------------------------|----------------|
|                                                                                                                                                                                                                                                                                      |  |                                                              |  | FOR LINE NUMBER<br>11A1                                                       |                |
| 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. |  |                                                              |  |                                                                               |                |
| <b>NAME OF COMMITTEE (in Full)</b><br><b>Dear for Congress Inc.</b>                                                                                                                                                                                                                  |  |                                                              |  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Martin Ben-Dayan<br>1411 Broadway<br><br>New York NY 10018                                                                                                                                                                    |  | <b>Name of Employer</b><br>Glaxo                             |  | <b>Date (month, day, year)</b><br>08/05/1998                                  |                |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>Vice President                          |  | <b>Amount of Each Receipt This Period</b><br>1000.00                          |                |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregat Year-to-Date</b> > \$ 1000.00                    |  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Abraham Ben-Dayan<br>1411 Broadway<br>33rd Floor<br>New York NY 10018                                                                                                                                                         |  | <b>Name of Employer</b><br>Ben-Dayan                         |  | <b>Date (month, day, year)</b><br>08/05/1998                                  |                |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>President                               |  | <b>Amount of Each Receipt This Period</b><br>500.00                           |                |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregat Year-to-Date</b> > \$ 1000.00                    |  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Marlene Ben-Dayan<br>1895 E. 4th Street<br><br>Brooklyn NY 11223                                                                                                                                                             |  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br> |  | <b>Date (month, day, year)</b><br>08/05/1998                                  |                |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregat Year-to-Date</b> > \$ 1000.00                    |  | <b>Amount of Each Receipt this Period</b><br>500.00                           |                |
|                                                                                                                                                                                                                                                                                      |  |                                                              |  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Ira Friedman<br>280 West End Avenue<br><br>New York NY 10023                                                                                                                                                                  |  | <b>Name of Employer</b><br>Self-employed                     |  | <b>Date (month, day, year)</b><br>08/05/1998                                  |                |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>Doctor                                  |  | <b>Amount of Each Receipt this Period</b><br>250.00                           |                |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregat Year-to-Date</b> > \$ 250.00                     |  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Abe Tref<br>5310 18th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                                         |  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br> |  | <b>Date (month, day, year)</b><br>08/05/1998                                  |                |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregat Year-to-Date</b> > \$ 1000.00                    |  | <b>Amount of Each Receipt this Period</b><br>1000.00                          |                |
|                                                                                                                                                                                                                                                                                      |  |                                                              |  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jay Golon<br>767 5th Avenue<br><br>New York NY 10153                                                                                                                                                                          |  | <b>Name of Employer</b><br>Golon Associates, LLC             |  | <b>Date (month, day, year)</b><br>08/05/1998                                  |                |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Occupation</b><br>Executive                               |  | <b>Amount of Each Receipt This Period</b><br>500.00                           |                |
|                                                                                                                                                                                                                                                                                      |  | <b>Aggregat Year-to-Date</b> > \$ 500.00                     |  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Frederic Heller<br>318 East 54th Street<br><br>New York NY 10046                                                                                                                                                              |  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br> |  | <b>Date (month, day, year)</b><br>08/05/1998                                  |                |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                        |  | <b>Aggregat Year-to-Date</b> > \$ 500.00                     |  | <b>Amount of Each Receipt This Period</b><br>500.00                           |                |
|                                                                                                                                                                                                                                                                                      |  |                                                              |  |                                                                               |                |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                              |  |                                                              |  |                                                                               |                |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                    |  |                                                              |  |                                                                               |                |



# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                        |                                   |                                       |                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------------|-------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Eric Frus<br>1305 East 4th Street<br><br>Brooklyn NY 11230                      | Name of Employer<br>Self Employed | Date (month, day, year)<br>08/06/1998 | Amount of Each Receipt This Period<br>\$500.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney            | Aggregate Year-to-Date > \$ 500.00    |                                                 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. David Smetana<br>675 Emaline Blvd<br><br>Brooklyn NY 11213                      | Name of Employer<br>Self Employed | Date (month, day, year)<br>08/05/1998 | Amount of Each Receipt This Period<br>\$250.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney            | Aggregate Year-to-Date > \$ 250.00    |                                                 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Martin Wesel<br>638 McDonald Avenue<br><br>Brooklyn NY 11213                    | Name of Employer<br>Self Employed | Date (month, day, year)<br>08/06/1998 | Amount of Each Receipt This Period<br>\$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney            | Aggregate Year-to-Date > \$ 1000.00   |                                                 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Gloria Harary<br>1571 East 5th Street<br><br>Brooklyn NY 11230                 | Name of Employer<br>Self Employed | Date (month, day, year)<br>08/26/1998 | Amount of Each Receipt This Period<br>\$375.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Bookmaker           | Aggregate Year-to-Date > \$ 375.00    |                                                 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Meyer Adler<br>962 East 19th Street<br><br>Brooklyn NY 11230                    | Name of Employer<br>Self Employed | Date (month, day, year)<br>08/06/1998 | Amount of Each Receipt This Period<br>\$500.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Doctor              | Aggregate Year-to-Date > \$ 500.00    |                                                 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Harary<br>1350 Broadway<br><br>New York NY 10018                         | Name of Employer<br>Jacques Moret | Date (month, day, year)<br>08/06/1998 | Amount of Each Receipt This Period<br>\$375.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Vice President      | Aggregate Year-to-Date > \$ 375.00    |                                                 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jack Beyda<br>1411 Broadway<br><br>New York NY 10018                            | Name of Employer<br>Self Employed | Date (month, day, year)<br>08/06/1998 | Amount of Each Receipt This Period<br>\$250.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Executive           | Aggregate Year-to-Date > \$ 250.00    |                                                 |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                      |                                   |                                       |                                                 |
| <b>TOTALS This Period (last page this line number only)</b>                                                                            |                                   |                                       |                                                 |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
15A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

## Full Name, Mailing Address, and ZIP Code

Mr. Isaac Ashkenazi  
1434 East 23rd Street

Brooklyn NY 11210

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

## Name of Employer

SP Technologies, Inc.

Occupation  
Executive

Date (month,  
day, year)  
06/07/1998

Amount of Each  
Receipt This Period  
250.00

Aggregate Year-to-Date \$ 250.00

## Full Name, Mailing Address, and ZIP Code

Mr. David Berg  
10 Sherwood Street

Wayne NJ 07470

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

## Name of Employer

Occupation

Date (month,  
day, year)  
08/10/1998

Amount of Each  
Receipt This Period  
500.00

Aggregate Year-to-Date \$ 500.00

## Full Name, Mailing Address, and ZIP Code

Mr. Jack Nash  
280 Park Avenue  
21st Floor, West Tower  
New York NY 10017

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

## Name of Employer

Nash's Wholesale Industries

Occupation  
Executive

Date (month,  
day, year)  
08/10/1998

Amount of Each  
Receipt This Period  
1000.00

Aggregate Year-to-Date \$ 1000.00

## Full Name, Mailing Address, and ZIP Code

Mr. Sarth Adelsberg  
2003 Jericho Turnpike

New Hyde Park NY 11040

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

## Name of Employer

Occupation  
Student

Date (month,  
day, year)  
08/10/1998

Amount of Each  
Receipt This Period  
1000.00

Aggregate Year-to-Date \$ 1000.00

## Full Name, Mailing Address, and ZIP Code

Mr. David Adelsberg  
2003 Jericho Turnpike

New Hyde Park NY 11040

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

## Name of Employer

Occupation  
Student

Date (month,  
day, year)  
08/10/1998

Amount of Each  
Receipt This Period  
1000.00

Aggregate Year-to-Date \$ 1000.00

## Full Name, Mailing Address, and ZIP Code

Mr. Avi Adelsberg  
2003 Jericho Turnpike

New Hyde Park NY 11040

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

## Name of Employer

Occupation  
Student

Date (month,  
day, year)  
08/10/1998

Amount of Each  
Receipt This Period  
1000.00

Aggregate Year-to-Date \$ 1000.00

## Full Name, Mailing Address, and ZIP Code

Mrs. Barbara Kamineslsky  
91-31 175th Street

Jamaica NY 11432

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

## Name of Employer

Occupation  
Homemaker

Date (month,  
day, year)  
08/10/1998

Amount of Each  
Receipt This Period  
1000.00

Aggregate Year-to-Date \$ 1000.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

# SCHEDULE A

# ITEMIZED RECEIPTS

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

35 / 65

FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                    |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Yidel Waxman<br>1481 47th Street<br><br>Brooklyn NY 11219                              | <b>Name of Employer</b><br>Hamilton Realty<br><br><b>Occupation</b><br>Executive   | <b>Date (month, day, year)</b><br>08/10/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                         |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Eli Perl<br>1481 47th Street<br><br>Brooklyn NY 11219                                  | <b>Name of Employer</b><br>Hamilton Realty<br><br><b>Occupation</b><br>Executive   | <b>Date (month, day, year)</b><br>08/10/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                         |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Morris Bertram<br>1242 57th Street<br><br>Brooklyn NY 11219                            | <b>Name of Employer</b><br><br><br><b>Occupation</b>                               | <b>Date (month, day, year)</b><br>08/10/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                         |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Yossie Gutman<br>4907 18th Avenue #2<br><br>Brooklyn NY 11204                          | <b>Name of Employer</b><br>Gutman Management<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>08/10/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                          |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Robert Jr. Brooker, Jr.<br>175 School Street<br><br>Manchester MA 01844                | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Retired                    | <b>Date (month, day, year)</b><br>08/10/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                         |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Samuel Adelsberg<br>2003 Jericho Turnpike<br><br>New Hyde Park NY 11040                | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Student                    | <b>Date (month, day, year)</b><br>08/10/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                         |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Helen Adelsberg<br>2003 Jericho Turnpike<br><br>New Hyde Park NY 11040                | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Retired                    | <b>Date (month, day, year)</b><br>08/10/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                         |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                    |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                    |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (In Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                    |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Robert Wallach<br>219 Feeks Lane<br>P.O. Box 430<br>Mill Neck NY 11765                 | <b>Name of Employer</b><br>The Robert Plan Company | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>CEO                           | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Michelle Wallach<br>219 Feeks Lane<br>P.O. Box 430<br>Mill Neck NY 11765              | <b>Name of Employer</b>                            | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Homemaker                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Marlin Haddad<br>1630 East 3rd Street<br>Brooklyn NY 11230                             | <b>Name of Employer</b>                            | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>301.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                                  | <b>Aggregate Year-to-Date</b> > \$ 301.00    |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Michael Winner<br>475 B Laurel Avenue<br>Highland Park IL 60035                        | <b>Name of Employer</b><br>Vision LP               | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Commodity Trader              | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Leah Bracher<br>10 Meadow Lane<br>Lawrence NY 11559                                   | <b>Name of Employer</b>                            | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Homemaker                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Menschem Langer<br>721 East 7th Street<br>Brooklyn NY 11558                            | <b>Name of Employer</b>                            | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                                  | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Stephen Savitsky<br>423 Daub Avenue<br>Hewlett NY 11557                                | <b>Name of Employer</b><br>Staff Builders          | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                             |                                                    |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                                   |                                                    |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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**NAME OF COMMITTEE (In Full)**  
Dear for Congress Inc.

|                                                                                                                                                                                                                                                                             |                                                                                                                                        |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Neil Rosen<br>7 Hazen Place<br><br>Woodmere NY 11598<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Name of Employer</b><br><br><b>Occupation</b><br><br>Aggregate Year-to-Date > \$ 1000.00                                            | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Harry Katowitz<br>584 Green Place<br><br>Woodmere NY 11598<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Name of Employer</b><br>Kay Management Inc.<br><br><b>Occupation</b><br>Executive<br><br>Aggregate Year-to-Date > \$ 1000.00        | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. David Ginh<br>38 West 21st Street<br><br>New York NY 10010<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Name of Employer</b><br>E.M. Winston Instruments<br><br><b>Occupation</b><br>Executive<br><br>Aggregate Year-to-Date > \$ 1000.00   | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Michael Karoff<br>1325 East 27th Street<br><br>Brooklyn NY 11210<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Name of Employer</b><br>Self-Employed<br><br><b>Occupation</b><br>Real Estate Agent<br><br>Aggregate Year-to-Date > \$ 500.00       | <b>Date (month, day, year)</b><br>08/13/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Labish Kamenetsky<br>1124 East 24th Street<br><br>Brooklyn NY 11210<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Name of Employer</b><br><br><b>Occupation</b><br><br>Aggregate Year-to-Date > \$ 750.00                                             | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Receipt this Period</b><br>750.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Naomi Yakuel<br>131-53 40th Road<br><br>Flushing NY 11354<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Name of Employer</b><br>Self-Employed<br><br><b>Occupation</b><br>Executive<br><br>Aggregate Year-to-Date > \$ 1000.00              | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Yitzchok Margulies<br>2160 North Central Road<br><br>Fort Lee NJ 07024<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br>Firesbury Management, Inc.<br><br><b>Occupation</b><br>Executive<br><br>Aggregate Year-to-Date > \$ 1000.00 | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                                                                                                                                                           |                                                                                                                                        |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                                                                                                                                                                 |                                                                                                                                        |                                              |                                                      |

**SCHEDULE A****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER  
11A1

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**NAME OF COMMITTEE (in Full)**  
**Dear for Congress Inc.**

|                                                                                                                              |                                                                                                                                               |                                              |                                                      |
|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Mira Barnes<br>9 West North Field Road<br><br>Livingston NJ 07039      | <b>Name of Employer</b>                                                                                                                       | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
|                                                                                                                              | <b>Occupation</b><br>Homemaker                                                                                                                |                                              |                                                      |
|                                                                                                                              | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jacob Klein<br>48 Rockledge Drive<br><br>Livingston NJ 07039          | <b>Name of Employer</b>                                                                                                                       | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
|                                                                                                                              | <b>Occupation</b>                                                                                                                             |                                              |                                                      |
|                                                                                                                              | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Larry Pantlir<br>60 East Harborside Drive<br><br>Short Hills NJ 07078 | <b>Name of Employer</b>                                                                                                                       | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
|                                                                                                                              | <b>Occupation</b>                                                                                                                             |                                              |                                                      |
|                                                                                                                              | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Izzy Spiegel<br>600 Cape May Street<br><br>Harrison NJ 07029          | <b>Name of Employer</b><br>Spiegel Trucking Company                                                                                           | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
|                                                                                                                              | <b>Occupation</b><br>Owner                                                                                                                    |                                              |                                                      |
|                                                                                                                              | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Charles Haddad<br>701 Avenue K<br><br>Brooklyn NY 11230               | <b>Name of Employer</b><br>The Haddad Organization Ltd.                                                                                       | <b>Date (month, day, year)</b><br>08/17/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
|                                                                                                                              | <b>Occupation</b><br>Executive                                                                                                                |                                              |                                                      |
|                                                                                                                              | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Yisroel Rabinowitz<br>1189 47th Street<br><br>Brooklyn NY 11219       | <b>Name of Employer</b><br>Brucha Mortgage Bankers Corp.                                                                                      | <b>Date (month, day, year)</b><br>08/17/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
|                                                                                                                              | <b>Occupation</b><br>Executive                                                                                                                |                                              |                                                      |
|                                                                                                                              | <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00   |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Andrew Lowinger<br>105 Madelon Avenue<br><br>New York NY 10016        | <b>Name of Employer</b><br>US Electronics                                                                                                     | <b>Date (month, day, year)</b><br>08/19/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
|                                                                                                                              | <b>Occupation</b><br>Executive                                                                                                                |                                              |                                                      |
|                                                                                                                              | <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 2000.00   |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                            |                                                                                                                                               |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                  |                                                                                                                                               |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                                                                                                                                                     |                                                                                                                                   |                                              |                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Steven Lowinger<br>105 Madison Avenue<br><br>New York NY 10016<br><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br>US Electronics<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 2000.00 | <b>Date (month, day, year)</b><br>08/19/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Brian Lowinger<br>105 Madison Avenue<br><br>New York NY 10016<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Student<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                 | <b>Date (month, day, year)</b><br>08/19/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. David Lowinger<br>105 Madison Avenue<br><br>New York NY 10016<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Student<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                 | <b>Date (month, day, year)</b><br>08/19/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms. Milka Lowinger<br>105 Madison Avenue<br><br>New York NY 10016<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Student<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                 | <b>Date (month, day, year)</b><br>08/19/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ben Lowinger<br>1684 E 7th Street<br><br>Brooklyn NY 11230<br><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Name of Employer</b><br>Unisonic<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 2000.00       | <b>Date (month, day, year)</b><br>08/19/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ronald Lowinger<br>1459 47th Street<br><br>Brooklyn NY 11219<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Name of Employer</b><br>US Electronics<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 2000.00 | <b>Date (month, day, year)</b><br>08/19/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Edith Lowinger<br>105 Madison Avenue<br><br>New York NY 10016<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Homemaker<br><br><b>Aggregate Year-to-Date</b> > \$ 2000.00               | <b>Date (month, day, year)</b><br>08/19/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                             |                                                                                                                                   |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                   |                                                                                                                                   |                                              |                                                      |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                                     |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page                            | <b>40 / 66</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------|----------------|
|                                                                                                                                                                                                                                                                                      |  |                                                                                              |  | FOR LINE NUMBER<br><b>11A1</b>                                                                           |                |
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| <b>NAME OF COMMITTEE (in Full)</b><br><b>Dear for Congress Inc.</b>                                                                                                                                                                                                                  |  |                                                                                              |  |                                                                                                          |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Miriam Rubin<br>5101 18th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                                    |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                                |  | <b>Date (month, day, year)</b><br>08/19/1998<br><br><b>Amount of Each Receipt this Period</b><br>1000.00 |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 1000.00                                                          |  |                                                                                                          |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Yankee Rubin<br>5101 18th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                                     |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>retired                                  |  | <b>Date (month, day, year)</b><br>08/19/1998<br><br><b>Amount of Each Receipt this Period</b><br>1000.00 |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 1000.00                                                          |  |                                                                                                          |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Morris Ades<br>180 West 34th Street<br><br>New York NY 10001                                                                                                                                                                  |  | <b>Name of Employer</b><br>S & A Stores<br><br><b>Occupation</b><br>Executive                |  | <b>Date (month, day, year)</b><br>08/19/1998<br><br><b>Amount of Each Receipt this Period</b><br>500.00  |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 500.00                                                           |  |                                                                                                          |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Stuart Katz<br>43-22 10th Street<br><br>Long Island City NY 11101                                                                                                                                                             |  | <b>Name of Employer</b><br>Ideal Roofing and Sheet Metal<br><br><b>Occupation</b><br>Manager |  | <b>Date (month, day, year)</b><br>08/19/1998<br><br><b>Amount of Each Receipt this Period</b><br>1000.00 |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 1000.00                                                          |  |                                                                                                          |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jack Basch<br>1755 68th Street<br><br>Brooklyn NY 11204                                                                                                                                                                       |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                                |  | <b>Date (month, day, year)</b><br>08/20/1998<br><br><b>Amount of Each Receipt this Period</b><br>500.00  |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 500.00                                                           |  |                                                                                                          |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Steven Zakheim<br>5811 Foster Avenue<br><br>Brooklyn NY 11234                                                                                                                                                                 |  | <b>Name of Employer</b><br>Metropolitan Ambulette<br><br><b>Occupation</b><br>President      |  | <b>Date (month, day, year)</b><br>08/20/1998<br><br><b>Amount of Each Receipt this Period</b><br>1000.00 |                |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 2000.00                                                          |  |                                                                                                          |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Susan Zakheim<br>5811 Foster Avenue<br><br>Brooklyn NY 11234                                                                                                                                                                 |  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                                |  | <b>Date (month, day, year)</b><br>08/20/1998<br><br><b>Amount of Each Receipt this Period</b><br>1000.00 |                |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 1000.00                                                          |  |                                                                                                          |                |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                              |  |                                                                                              |  |                                                                                                          |                |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                    |  |                                                                                              |  |                                                                                                          |                |



# SCHEDULE A

# ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                               |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Mitchel Maidman<br>432 East 87th Street<br><br>New York NY 10128                       | <b>Name of Employer</b><br>Maidman & Mittelman, LLP<br><br><b>Occupation</b><br>Attorney      | <b>Date (month, day, year)</b><br>08/20/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Steven Zeinick<br>450 Park Avenue<br><br>New York NY 10022                             | <b>Name of Employer</b><br>Morse, Zeinick, Rose & Lander<br><br><b>Occupation</b><br>Attorney | <b>Date (month, day, year)</b><br>08/21/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Bernard Newman<br>648 East 130th Street<br><br>Brooklyn NY 11230                       | <b>Name of Employer</b><br><br><br><b>Occupation</b>                                          | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Bernard Sterling<br>6 Regent Street<br><br>Livingston NJ 07039                         | <b>Name of Employer</b><br>Ehrenkrantz, Sterling & Co. LLC<br><br><b>Occupation</b><br>CPA    | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>380.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 380.00                                                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Sharon Hedded<br>619 Avenue J<br><br>Brooklyn NY 11230                                | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Homemaker                             | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Robert Kwap<br>13302 Oakview Court<br><br>Palos Heights IL 60463                       | <b>Name of Employer</b><br>Camelot Homes Inc.<br><br><b>Occupation</b><br>Executive           | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                     |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Morris Lieberman<br>2009 Avenue J<br><br>Brooklyn NY 11230                             | <b>Name of Employer</b><br>Limor Management LLC<br><br><b>Occupation</b><br>Executive         | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                                     |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                             |                                                                                               |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                                   |                                                                                               |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

42 / 85

FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                               |                                                                                       |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jack Sitt<br>1896 East 3rd Street<br><br>Brooklyn NY 11223                             | <b>Name of Employer</b><br>Baby Togs Inc.<br><br><b>Occupation</b><br>Executive       | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ephraim Reich<br>5724 2nd Avenue<br><br>Brooklyn NY 11220                              | <b>Name of Employer</b><br>Cougar International<br><br><b>Occupation</b><br>Executive | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Howard Frank<br>682 Bedford Avenue<br><br>Brooklyn NY 11211                            | <b>Name of Employer</b><br>Self-Employed<br><br><b>Occupation</b><br>Doctor           | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                             |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Morris Sutton<br>244 Fernwood Avenue<br><br>Edison NJ 08837                            | <b>Name of Employer</b><br>Majesco Corp.<br><br><b>Occupation</b><br>Executive        | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                            |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Gerald Plinsky<br>515 Green Place<br><br>Woodmere NY 11598                             | <b>Name of Employer</b><br><br><br><b>Occupation</b>                                  | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                             |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Harvey Rosenblum<br>220 Madison Avenue<br><br>New York NY 10016                        | <b>Name of Employer</b><br>Rosenblum Eye Centers<br><br><b>Occupation</b><br>Doctor   | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                             |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Otto Weingarten<br>1881 53rd Street<br><br>Brooklyn NY 11204                           | <b>Name of Employer</b><br><br><br><b>Occupation</b>                                  | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Receipt this Period</b><br>640.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                            |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                       |                                                                                       |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                             |                                                                                       |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

43 / 65

FOR LINE NUMBER  
11A1

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)  
Dear for Congress Inc.

|                                                                                                                                                |                                                               |                                              |                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Helen Slegar<br>27-37 27th Street<br><br>Astoria NY 11102                              | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker | <b>Date (month, day, year)</b><br>08/24/1996 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ma Deana Landa<br>1337 E. 7th Street<br><br>Brooklyn NY 11230                               | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker | <b>Date (month, day, year)</b><br>08/25/1996 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 2000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Rita Landa<br>1337 East 7th Street<br><br>Brooklyn NY 11230                              | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker | <b>Date (month, day, year)</b><br>08/25/1996 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 1000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Eather Landa<br>1337 E. 7th Street<br><br>Brooklyn NY 11230                              | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker | <b>Date (month, day, year)</b><br>08/25/1996 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 2000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Sheya Landa<br>1337 E. 7th Street<br><br>Brooklyn NY 11230                               | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker | <b>Date (month, day, year)</b><br>08/25/1996 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 2000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Judy Landa<br>1337 E. 7th Street<br><br>Brooklyn NY 11230                                | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker | <b>Date (month, day, year)</b><br>08/25/1996 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 2000.00                    |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Martin Jacobs<br>P.O. Box 130<br><br>Laurel MD 20725                                    | <b>Name of Employer</b><br><br><b>Occupation</b><br>Retired   | <b>Date (month, day, year)</b><br>08/25/1996 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Aggregate Year-to-Date</b> > \$ 500.00                     |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                              |                                                               |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                                    |                                                               |                                              |                                                      |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                          |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | 44 / 65                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|--------------------------------------------------|
|                                                                                                                                                                                                                                                                                      |  |                                                                                   |  | FOR LINE NUMBER<br>11A1                                                       |                                                  |
| 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. |  |                                                                                   |  |                                                                               |                                                  |
| <b>NAME OF COMMITTEE (In Full)</b><br>Dear for Congress Inc.                                                                                                                                                                                                                         |  |                                                                                   |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Eugene Romano<br>1824 Shore Parkway<br><br>Brooklyn NY 11214                                                                                                                                                                         |  | Name of Employer<br>Nellie Bly Amusement Park<br><br>Occupation<br>Owner          |  | Date (month,<br>day, year)<br>08/25/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                               |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Dr. Jerome Finkelstein<br>9900 Van Wyck Expressway<br><br>Jamaica NY 11419                                                                                                                                                               |  | Name of Employer<br>Staten Island University Hospital<br><br>Occupation<br>Doctor |  | Date (month,<br>day, year)<br>08/25/1998                                      | Amount of Each<br>Receipt this Period<br>300.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 300.00                                                |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Ken Cayre<br>10 East 40th Street<br><br>New York NY 10018                                                                                                                                                                            |  | Name of Employer<br>GT Interactive<br><br>Occupation<br>Executive                 |  | Date (month,<br>day, year)<br>08/25/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 2000.00                                               |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Ken Cayre<br>10 East 40th Street<br><br>New York NY 10018                                                                                                                                                                            |  | Name of Employer<br>GT Interactive<br><br>Occupation<br>Executive                 |  | Date (month,<br>day, year)<br>08/25/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 2000.00                                               |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mrs. Lillian Cayre<br>16 East 40th Street<br><br>New York NY 10018                                                                                                                                                                       |  | Name of Employer<br>Good Times Home Video<br><br>Occupation<br>President          |  | Date (month,<br>day, year)<br>08/25/1998                                      | Amount of Each<br>Receipt this Period<br>500.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 500.00                                                |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Dr. Max April<br>115 Bacon Road<br><br>Old Westbury NY 11568                                                                                                                                                                             |  | Name of Employer<br>Self-Employed<br><br>Occupation<br>Doctor                     |  | Date (month,<br>day, year)<br>08/25/1998                                      | Amount of Each<br>Receipt this Period<br>250.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 250.00                                                |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Menachem Noe<br>1563 49th Street<br><br>Brooklyn NY 11210                                                                                                                                                                            |  | Name of Employer<br>Eshel Jewelry MFG. Co.<br><br>Occupation<br>Executive         |  | Date (month,<br>day, year)<br>08/28/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                               |  |                                                                               |                                                  |
| <b>SUBTOTALS</b> of Receipts This Page (Optional) .....                                                                                                                                                                                                                              |  |                                                                                   |  |                                                                               |                                                  |
| <b>TOTALS</b> This Period (last page this line number only) .....                                                                                                                                                                                                                    |  |                                                                                   |  |                                                                               |                                                  |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                           |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | <b>45 / 65</b>                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|--------------------------------------------------|
|                                                                                                                                                                                                                                                                                      |  |                                                                                    |  | FOR LINE NUMBER<br>11A                                                        |                                                  |
| 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. |  |                                                                                    |  |                                                                               |                                                  |
| <b>NAME OF COMMITTEE (in Full)</b><br>Dear for Congress Inc.                                                                                                                                                                                                                         |  |                                                                                    |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Ronald Adjmi<br>100 West 33rd Street<br>Suite 1155<br>New York NY 10001                                                                                                                                                              |  | Name of Employer<br><br>Occupation                                                 |  | Date (month,<br>day, year)<br>08/26/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                                |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Albert Nigri<br>4720 3rd Avenue<br><br>Brooklyn NY 11220                                                                                                                                                                             |  | Name of Employer<br><br>Occupation                                                 |  | Date (month,<br>day, year)<br>08/26/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                                |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Ms. Tova Rothman<br>P.O. Box 5217<br><br>New York NY 10185                                                                                                                                                                               |  | Name of Employer<br>United Securities Services Inc.<br><br>Occupation<br>Executive |  | Date (month,<br>day, year)<br>08/26/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                                |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Barry Gottahner<br>1148 58th Street<br><br>Brooklyn NY 11219                                                                                                                                                                         |  | Name of Employer<br><br>Occupation                                                 |  | Date (month,<br>day, year)<br>08/26/1998                                      | Amount of Each<br>Receipt this Period<br>500.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 500.00                                                 |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Nachum Stein<br>444 Madison Avenue<br><br>New York NY 10022                                                                                                                                                                          |  | Name of Employer<br>American European Group<br><br>Occupation<br>Executive         |  | Date (month,<br>day, year)<br>08/26/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                                |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Dr. Peter McCann<br>Beth Israel Hospital North<br><br>New York NY 10128                                                                                                                                                                  |  | Name of Employer<br>Beth Israel Hospital<br><br>Occupation<br>Doctor               |  | Date (month,<br>day, year)<br>08/26/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                                |  |                                                                               |                                                  |
| Full Name, Mailing Address, and ZIP Code<br>Mrs. Dolores McCann<br>Beth Israel Hospital North<br><br>New York NY 10128                                                                                                                                                               |  | Name of Employer<br><br>Occupation<br>Homemaker                                    |  | Date (month,<br>day, year)<br>08/26/1998                                      | Amount of Each<br>Receipt this Period<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                                |  |                                                                               |                                                  |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                              |  |                                                                                    |  |                                                                               |                                                  |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                    |  |                                                                                    |  |                                                                               |                                                  |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

46 / 65

FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                                                                                                                                                          |                                                                                                                                        |                                              |                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. W. Norman Scott<br>170 East End Avenue<br><br>New York NY 10128<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Name of Employer</b><br>Self-Employed<br><br><b>Occupation</b><br>Doctor<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00          | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Susan Scott<br>170 East End Avenue<br><br>New York NY 10128<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Homemaker<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                    | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Raymond Ashkanazian<br>12 West 37th Street<br><br>New York NY 10018<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br>Almar Sales Company<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Cohen<br>825 3rd Avenue<br>40th Floor<br>New York NY 10022<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                             | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jacob Posner<br>581 McDonald Avenue<br><br>Brooklyn NY 11218<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Name of Employer</b><br>Filmtech Inc.<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 400.00        | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>400.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Helyn Katslin<br><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                   | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                             | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Doreen Hacker<br>2228 east 58th Street<br><br>Brooklyn NY 11234<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Name of Employer</b><br><br><br><b>Occupation</b><br>Homemaker<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                    | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>SUBTOTALS of Receipts This Page (Optional)</b>                                                                                                                                                                                                                        |                                                                                                                                        |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b>                                                                                                                                                                                                              |                                                                                                                                        |                                              |                                                      |

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                              |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | <b>47 / 65</b>                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|---------------------------------------------------------|
|                                                                                                                                                                                                                                                                                      |  |                                                                                       |  | FOR LINE NUMBER<br><b>11A</b>                                                 |                                                         |
| 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)<br><b>Dear for Congress Inc.</b>                                                                                                                                                                                                                         |  |                                                                                       |  |                                                                               |                                                         |
| Full Name, Mailing Address, and ZIP Code<br><b>Mr. Itshack Podrigal</b>                                                                                                                                                                                                              |  | Name of Employer<br><br>Occupation                                                    |  | Date (month,<br>day, year)<br><b>08/26/1998</b>                               | Amount of Each<br>Receipt this Period<br><b>1000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ <b>1000.00</b>                                            |  |                                                                               |                                                         |
| Full Name, Mailing Address, and ZIP Code<br><b>Mrs. Shal Yair</b>                                                                                                                                                                                                                    |  | Name of Employer<br><br>Occupation                                                    |  | Date (month,<br>day, year)<br><b>08/26/1998</b>                               | Amount of Each<br>Receipt this Period<br><b>1000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ <b>1000.00</b>                                            |  |                                                                               |                                                         |
| Full Name, Mailing Address, and ZIP Code<br><b>Mr. Joe Yair</b>                                                                                                                                                                                                                      |  | Name of Employer<br><br>Occupation                                                    |  | Date (month,<br>day, year)<br><b>08/26/1998</b>                               | Amount of Each<br>Receipt this Period<br><b>1000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ <b>1000.00</b>                                            |  |                                                                               |                                                         |
| Full Name, Mailing Address, and ZIP Code<br><b>Mr. Alan Maleh</b><br><b>460 Avenue S</b><br><br><b>Brooklyn NY 11201</b>                                                                                                                                                             |  | Name of Employer<br><b>Albee Square Jewlers</b><br><br>Occupation<br><b>Executive</b> |  | Date (month,<br>day, year)<br><b>08/26/1998</b>                               | Amount of Each<br>Receipt this Period<br><b>1000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ <b>1000.00</b>                                            |  |                                                                               |                                                         |
| Full Name, Mailing Address, and ZIP Code<br><b>Dr. Marc Feder</b><br><b>288 Broad Avenue</b><br><br><b>Englewood NY 07631</b>                                                                                                                                                        |  | Name of Employer<br><b>Acher Knitting Mills</b><br><br>Occupation<br><b>Executive</b> |  | Date (month,<br>day, year)<br><b>08/26/1998</b>                               | Amount of Each<br>Receipt this Period<br><b>250.00</b>  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ <b>250.00</b>                                             |  |                                                                               |                                                         |
| Full Name, Mailing Address, and ZIP Code<br><b>Mrs. Deedee Horigataid</b><br><b>989 East End</b><br><br><b>Woodmere NY 11566</b>                                                                                                                                                     |  | Name of Employer<br><br>Occupation<br><b>Homemaker</b>                                |  | Date (month,<br>day, year)<br><b>08/26/1998</b>                               | Amount of Each<br>Receipt this Period<br><b>1000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ <b>1000.00</b>                                            |  |                                                                               |                                                         |
| Full Name, Mailing Address, and ZIP Code<br><b>Mr. Charles Nelson</b><br><b>702 Avenue P</b><br><br><b>Brooklyn NY 11223</b>                                                                                                                                                         |  | Name of Employer<br><br>Occupation                                                    |  | Date (month,<br>day, year)<br><b>08/26/1998</b>                               | Amount of Each<br>Receipt this Period<br><b>1000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ <b>1000.00</b>                                            |  |                                                                               |                                                         |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                              |  |                                                                                       |  |                                                                               |                                                         |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                    |  |                                                                                       |  |                                                                               |                                                         |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (In Full)  
Dear for Congress Inc.

|                                                                                                                                                                                                                                                                 |                                                                                                                                        |                                              |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Jack Cattan<br>37 West 37th Street<br><br>New York NY 10018<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Name of Employer</b><br>Ezracons Inc.<br><br><b>Occupation</b><br>Executive<br><b>Aggregate Year-to-Date</b> > \$ 500.00            | <b>Date (month, day, year)</b><br>08/28/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ayelet Yalac<br>134 Haven Avenue<br><br>New York NY 10032<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker<br><b>Aggregate Year-to-Date</b> > \$ 500.00                             | <b>Date (month, day, year)</b><br>08/28/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joe Shamle<br>175 Liberty Avenue<br><br>Brooklyn NY 11212<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Name of Employer</b><br>LSJ Associates<br><br><b>Occupation</b><br>Executive<br><b>Aggregate Year-to-Date</b> > \$ 1000.00          | <b>Date (month, day, year)</b><br>08/28/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Abraham Sarway<br>2 Park Avenue<br><br>New York NY 10016<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Name of Employer</b><br>Hertz, Herson & Co. LLP<br><br><b>Occupation</b><br>Executive<br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>08/28/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Kenneth Prager<br>231 S. Dwight Place<br><br>Brooklyn NY 11210<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 250.00                                      | <b>Date (month, day, year)</b><br>08/28/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Arthur Djmal<br>1205 East 22nd Street<br><br>Brooklyn NY 11210<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 250.00                                      | <b>Date (month, day, year)</b><br>08/28/1998 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Michael Gross<br>8233 Beverly Road<br><br>Kew Gardens NY 11415<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 500.00                                      | <b>Date (month, day, year)</b><br>08/28/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)



# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                                |                                                                                                                                                 |                                              |                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Edelman<br>242 Beach 20th Street<br><br>Far Rockaway NY 11691                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 500.00                                               | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : |                                                                                                                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Hy Anteby<br>939 East 9th Street<br><br>Brooklyn NY 11230                               | <b>Name of Employer</b><br>Code 18<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 500.00                       | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : |                                                                                                                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Joseph Bilsko<br>2255 Croysey Avenue<br><br>Brooklyn NY 11214                           | <b>Name of Employer</b><br>Bayview Manor Home for Adults<br><br><b>Occupation</b><br>Executive<br><br><b>Aggregate Year-to-Date</b> > \$ 300.00 | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Receipt this Period</b><br>300.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : |                                                                                                                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Aryeh Frimer<br>10700 West Higgins Road<br><br>Rosemont IL 60018                        | <b>Name of Employer</b><br><br><b>Occupation</b><br>Professor<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                                 | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : |                                                                                                                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Esther Frimer<br>10700 West Higgins Road<br><br>Rosemont IL 60018                        | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                                 | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : |                                                                                                                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Michal Frimer<br>10700 West Higgins Road<br><br>Rosemont IL 60018                        | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                                   | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : |                                                                                                                                                 |                                              |                                                      |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Yael Bellows<br>10700 West Higgins Road<br><br>Rosemont IL 60018                        | <b>Name of Employer</b><br><br><b>Occupation</b><br>Student<br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                                   | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : |                                                                                                                                                 |                                              |                                                      |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                        |                                                                                                                                                 |                                              |                                                      |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                              |                                                                                                                                                 |                                              |                                                      |

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                                                                                                                                                                  |                                                                                                                           |                                              |                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Nina Bellows<br>6041 North Lawndale<br><br>Chicago IL 60659<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date</b> > \$ 1000.00                 | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Eli Fink<br>1725 51st Street<br><br>Brooklyn NY 11204<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                       | <b>Name of Employer</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                        | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Fred Cushner<br>401 East 84th Street<br>Apt. 23 C<br>New York NY 10028<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Name of Employer</b><br>Self-Employed<br><br><b>Occupation</b><br>Doctor<br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Patricia Cushner<br>401 East 84th Street<br>Apt. 23 C<br>New York NY 10028<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker<br><b>Aggregate Year-to-Date</b> > \$ 1000.00               | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Michael Kelly<br>928 Hilton Road<br><br>Franklin Lakes NJ 07417<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Name of Employer</b><br>Self-Employed<br><br><b>Occupation</b><br>Doctor<br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mrs. Sarah Kelly<br>928 Hilton Road<br><br>Franklin Lakes NJ 07417<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker<br><b>Aggregate Year-to-Date</b> > \$ 1000.00               | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dr. Giles Scuderi<br>58 Second Street<br><br>Garden City NY 11530<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):               | <b>Name of Employer</b><br>Self-Employed<br><br><b>Occupation</b><br>Doctor<br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Receipt this Period</b><br>1000.00 |

SUBTOTALS of Receipts This Page (Optional) .....

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

# SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER  
11A1

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NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

## Full Name, Mailing Address, and ZIP Code

Mrs. Geraldine Scuderi  
56 Second Street

Garden City NY 11530

## Name of Employer

## Occupation

Homemaker

## Date (month, day, year)

08/28/1988

## Amount of Each Receipt this Period

1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 1000.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

246056.01

| <b>SCHEDULE A</b>                                                                                                                                                                                                                                                                    |  | <b>ITEMIZED RECEIPTS</b>                                                |  | 52 / 65                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                      |  | Use separate schedule(s) for each category of the Detailed Summary Page |  | FOR LINE NUMBER<br>110                                                                                   |
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| <b>NAME OF COMMITTEE (In Full)</b><br>Dear for Congress Inc.                                                                                                                                                                                                                         |  |                                                                         |  |                                                                                                          |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>United Service Workers of America<br>138-50 Queens Blvd.<br><br>Jamaica NY 11435                                                                                                                                                  |  | <b>Name of Employer</b><br><br><b>Occupation</b>                        |  | <b>Date (month, day, year)</b><br>07/30/1998<br><br><b>Amount of Each Receipt this Period</b><br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 1000.00                                     |  |                                                                                                          |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>SEIU CDE<br>1313 L Street NW<br><br>Washington DC 20005                                                                                                                                                                           |  | <b>Name of Employer</b><br><br><b>Occupation</b>                        |  | <b>Date (month, day, year)</b><br>07/31/1998<br><br><b>Amount of Each Receipt this Period</b><br>5000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 5000.00                                     |  |                                                                                                          |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>New York Stock Exchange<br>1800 K Street NW<br><br>Washington DC 20006                                                                                                                                                            |  | <b>Name of Employer</b><br><br><b>Occupation</b>                        |  | <b>Date (month, day, year)</b><br>07/31/1998<br><br><b>Amount of Each Receipt this Period</b><br>500.00  |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                                                                                                                               |  | Aggregate Year-to-Date > \$ 500.00                                      |  |                                                                                                          |
|                                                                                                                                                                                                                                                                                      |  |                                                                         |  |                                                                                                          |
| <b>SUBTOTALS of Receipts This Page (Optional)</b> .....                                                                                                                                                                                                                              |  |                                                                         |  |                                                                                                          |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                                                                                                                                                                    |  |                                                                         |  | <b>6500.00</b>                                                                                           |

| SCHEDULE A                                                                                                                                                                                                                                                                           |  | ITEMIZED RECEIPTS                   |                       | 53 / 65                                                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------|-----------------------|--------------------------------------------------------------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page                                                                                                                                                                                                              |  |                                     | FOR LINE NUMBER<br>16 |                                                                                            |
| 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)<br>Dear for Congress Inc.                                                                                                                                                                                                                                |  |                                     |                       |                                                                                            |
| Full Name, Mailing Address, and ZIP Code<br>Dear for Congress Inc.<br>5612 18th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                                      |  | Name of Employer<br><br>Occupation  |                       | Date (month, day, year)<br>07/30/1998<br><br>Amount of Each Receipt this Period<br>1210.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 4630.90 |                       |                                                                                            |
| Full Name, Mailing Address, and ZIP Code<br>Dear for Congress Inc.<br>5612 18th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                                      |  | Name of Employer<br><br>Occupation  |                       | Date (month, day, year)<br>07/30/1998<br><br>Amount of Each Receipt this Period<br>215.40  |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                                                                                                                              |  | Aggregate Year-to-Date > \$ 4630.90 |                       |                                                                                            |
|                                                                                                                                                                                                                                                                                      |  |                                     |                       |                                                                                            |
| SUBTOTALS of Receipts This Page (Optional) .....                                                                                                                                                                                                                                     |  |                                     |                       |                                                                                            |
| TOTALS This Period (last page this line number only) .....                                                                                                                                                                                                                           |  |                                     |                       | 1425.43                                                                                    |

**SCHEDULE B****ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page**54 / 65**FOR LINE NUMBER  
**17**

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**NAME OF COMMITTEE (in Full)**  
**Dear for Congress Inc.**

| Full Name, Mailing Address, and ZIP Code                                                        | Purpose of Disbursement                                                                                                                                              | Date (month, day, year) | Amount of Each Disbursement This Period |
|-------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| Mr. Alex Lutz<br>164-23 86th Street<br><br>Howard Beach NY 11414                                | Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | 07/01/1998              | 904.46                                  |
| Mr. John Peone<br>133 Henry Street<br><br>Brooklyn NY 11201                                     | Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | 07/01/1998              | 1996.67                                 |
| Mr. Andrew Hahn<br>215 West 10th Street<br><br>New York NY 10014                                | Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | 07/01/1998              | 6500.00                                 |
| Ram Caterers<br>2030 Ocean Parkway<br><br>Brooklyn NY 11223                                     | Fund-raiser<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | 07/01/1998              | 26356.25                                |
| Mr. Sander Schwartz<br>715 Empire Avenue<br><br>Far Rockaway NY 11691                           | Photography Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | 07/08/1998              | 500.00                                  |
| Applied Political Technologies Inc.<br>1028 North Royal Street, #350<br><br>Alexandria VA 22314 | Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | 07/07/1998              | 752.64                                  |
| United States Postmaster Brooklyn<br>6618 20th Avenue<br><br>Brooklyn NY 11204                  | Postage Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | 07/07/1998              | 65.00                                   |
| Roth & Company<br>5612 18th Avenue<br><br>Brooklyn NY 11204                                     | Professional Services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | 07/07/1998              | 1048.25                                 |
| Mr. Etan Epstein<br>399 Oxford Road<br><br>New Rochelle NY 10804                                | Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | 07/09/1998              | 300.00                                  |
| <b>SUBTOTALS of Disbursements This Page (Optional)</b> .....                                    |                                                                                                                                                                      |                         |                                         |
| <b>TOTALS This Period (last page this line number only)</b> .....                               |                                                                                                                                                                      |                         |                                         |

**SCHEDULE B**
**ITEMIZED DISBURSEMENTS**

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

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 FOR LINE NUMBER  
17

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 NAME OF COMMITTEE (in Full)  
Dear for Congress Inc.

|                                                                                                                                              |                                                                                                                                                                                                                    |                                              |                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. John Paone<br>133 Henry Street<br><br>Brooklyn NY 11201                               | <b>Purpose of Disbursement</b><br><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                | <b>Date (month, day, year)</b><br>07/10/1998 | <b>Amount of Each Disbursement This Period</b><br>379.32   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>The Mellman Group<br>1000 Thomas Jefferson Street, NW<br>Suite 520<br>Washington DC 20007 | <b>Purpose of Disbursement</b><br><br>Consulting Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Disbursement This Period</b><br>3889.30  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Sykut Computers<br>2021 Avenue U<br><br>Brooklyn NY 11229                                 | <b>Purpose of Disbursement</b><br><br>Computer Maintenance<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :         | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Disbursement This Period</b><br>595.38   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Stearns Consulting Inc.<br>174 Ripley Street<br><br>San Francisco CA 94110                | <b>Purpose of Disbursement</b><br><br>Consulting Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Disbursement This Period</b><br>22013.07 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Cunningham Harris Associates<br>201 Grand Central Avenue<br><br>Ripley WV 26271           | <b>Purpose of Disbursement</b><br><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Disbursement This Period</b><br>725.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. John Paone<br>133 Henry Street<br><br>Brooklyn NY 11201                               | <b>Purpose of Disbursement</b><br><br>Reimbursements<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :               | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Disbursement This Period</b><br>90.60    |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>164-23 96th Street<br><br>Howard Beach NY 11414                          | <b>Purpose of Disbursement</b><br><br>Reimbursements<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :               | <b>Date (month, day, year)</b><br>07/13/1998 | <b>Amount of Each Disbursement This Period</b><br>54.66    |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>United States Postmaster Brooklyn<br>6619 20th Avenue<br><br>Brooklyn NY 11204            | <b>Purpose of Disbursement</b><br><br>Postage<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                      | <b>Date (month, day, year)</b><br>07/14/1998 | <b>Amount of Each Disbursement This Period</b><br>640.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>164-23 96th Street<br><br>Howard Beach NY 11414                          | <b>Purpose of Disbursement</b><br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | <b>Date (month, day, year)</b><br>07/15/1998 | <b>Amount of Each Disbursement This Period</b><br>904.48   |

SUBTOTALS of Disbursements This Page (Optional) .....

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

**SCHEDULE B**
**ITEMIZED DISBURSEMENTS**

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

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**FOR LINE NUMBER**  
17

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**NAME OF COMMITTEE (In Full)**  
**Dear for Congress Inc.**

|                                                                                                                                       |                                                                                                                                                                                                       |                                              |                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Bell Atlantic<br>P.O. Box 1100<br><br>Albany NY 12250                              | <b>Purpose of Disbursement</b><br>Phone Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :      | <b>Date (month, day, year)</b><br>07/18/1998 | <b>Amount of Each Disbursement This Period</b><br>1301.79 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Con Edison<br>Jaf Station<br>P.O. Box 1702<br>New York NY 10116                    | <b>Purpose of Disbursement</b><br>Electrical Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>07/18/1998 | <b>Amount of Each Disbursement This Period</b><br>558.42  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dear for Congress Inc.<br>5612 18th Avenue<br><br>Brooklyn NY 11204                | <b>Purpose of Disbursement</b><br>Petty Cash<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :          | <b>Date (month, day, year)</b><br>07/18/1998 | <b>Amount of Each Disbursement This Period</b><br>295.16  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>1429 Coney Island Avenue Corp<br>1429 Coney Island Avenue<br><br>Brooklyn NY 11230 | <b>Purpose of Disbursement</b><br>Office Rent<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :         | <b>Date (month, day, year)</b><br>07/18/1998 | <b>Amount of Each Disbursement This Period</b><br>3000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Andrew Hahn<br>215 West 10th Street<br><br>New York NY 10014                   | <b>Purpose of Disbursement</b><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :       | <b>Date (month, day, year)</b><br>07/18/1998 | <b>Amount of Each Disbursement This Period</b><br>309.80  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Cunningham Harris Associates<br>201 Grand Central Avenue<br><br>Ripley WV 25271    | <b>Purpose of Disbursement</b><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :   | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Disbursement This Period</b><br>725.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Cunningham Harris Associates<br>201 Grand Central Avenue<br><br>Ripley WV 25271    | <b>Purpose of Disbursement</b><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :   | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Disbursement This Period</b><br>1288.30 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Con Edison<br>Jaf Station<br>P.O. Box 1702<br>New York NY 10116                    | <b>Purpose of Disbursement</b><br>Electrical Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Disbursement This Period</b><br>806.72  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Michael Cohen<br>1000 Ocean Parkway<br><br>Brooklyn NY 11230                   | <b>Purpose of Disbursement</b><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :              | <b>Date (month, day, year)</b><br>07/20/1998 | <b>Amount of Each Disbursement This Period</b><br>1000.00 |
| <b>SUBTOTALS of Disbursements This Page (Optional)</b>                                                                                |                                                                                                                                                                                                       |                                              |                                                           |
| <b>TOTALS This Period (last page this line number only)</b>                                                                           |                                                                                                                                                                                                       |                                              |                                                           |



| SCHEDULE B                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                             | ITEMIZED DISBURSEMENTS                                                  |                                                    | 57 / 65            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------|--------------------|
|                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                             | Use separate schedule(s) for each category of the Detailed Summary Page |                                                    | FOR LINE NUMBER 17 |
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| NAME OF COMMITTEE (in Full)<br>Dear for Congress Inc.                                                                                                                                                                                                                                |                                                                                                                                                                                                             |                                                                         |                                                    |                    |
| Full Name, Mailing Address, and ZIP Code<br>Ma Nikki Fried<br>1840 52nd Street<br>Apt. 20<br>Brooklyn NY 11204                                                                                                                                                                       | Purpose of Disbursement<br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | Date (month, day, year)<br>07/20/1998                                   | Amount of Each Disbursement This Period<br>257.25  |                    |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Mark Gellb<br>976 52nd Street<br><br>Brooklyn NY 11219                                                                                                                                                                               | Purpose of Disbursement<br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | Date (month, day, year)<br>07/20/1998                                   | Amount of Each Disbursement This Period<br>185.40  |                    |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Jamie Barach<br>1306 Avenue O<br><br>Brooklyn NY 11230                                                                                                                                                                               | Purpose of Disbursement<br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | Date (month, day, year)<br>07/20/1998                                   | Amount of Each Disbursement This Period<br>290.98  |                    |
| Full Name, Mailing Address, and ZIP Code<br>Steema Consulting Inc.<br>174 Ripley Street<br><br>San Francisco CA 94110                                                                                                                                                                | Purpose of Disbursement<br><br>Consulting Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | Date (month, day, year)<br>07/21/1998                                   | Amount of Each Disbursement This Period<br>6041.10 |                    |
| Full Name, Mailing Address, and ZIP Code<br>United States Postmaster Brooklyn<br>6618 20th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                           | Purpose of Disbursement<br><br>Postage<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                      | Date (month, day, year)<br>07/22/1998                                   | Amount of Each Disbursement This Period<br>6500.00 |                    |
| Full Name, Mailing Address, and ZIP Code<br>United States Postmaster Brooklyn<br>6618 20th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                           | Purpose of Disbursement<br><br>Postage<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                      | Date (month, day, year)<br>07/28/1998                                   | Amount of Each Disbursement This Period<br>1280.00 |                    |
| Full Name, Mailing Address, and ZIP Code<br>New York State Unemployment Insurance<br>P.O. Box 1588<br><br>Albany NY 12201                                                                                                                                                            | Purpose of Disbursement<br><br>Insurance Services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :           | Date (month, day, year)<br>07/29/1998                                   | Amount of Each Disbursement This Period<br>258.00  |                    |
| Full Name, Mailing Address, and ZIP Code<br>New York State Tax Department<br>Processing Unit<br>P.O. Box 3982<br>New York NY 10008                                                                                                                                                   | Purpose of Disbursement<br><br>Payroll taxes<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                | Date (month, day, year)<br>07/29/1998                                   | Amount of Each Disbursement This Period<br>2.94    |                    |
| Full Name, Mailing Address, and ZIP Code<br>New York State Tax Department<br>Processing Unit<br>P.O. Box 3982<br>New York NY 10008                                                                                                                                                   | Purpose of Disbursement<br><br>Payroll Taxes<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                | Date (month, day, year)<br>07/29/1998                                   | Amount of Each Disbursement This Period<br>176.40  |                    |
| SUBTOTALS of Disbursements This Page (Optional)                                                                                                                                                                                                                                      |                                                                                                                                                                                                             |                                                                         |                                                    |                    |
| TOTALS This Period (last page this line number only)                                                                                                                                                                                                                                 |                                                                                                                                                                                                             |                                                                         |                                                    |                    |

| <b>SCHEDULE B</b>                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                             | <b>ITEMIZED DISBURSEMENTS</b>                |                                                           | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | <b>56 / 65</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------------|----------------|
|                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                             |                                              |                                                           | FOR LINE NUMBER<br><b>17</b>                                                  |                |
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| <b>NAME OF COMMITTEE (in Full)</b><br>Dear for Congress Inc.                                                                                                                                                                                                                         |                                                                                                                                                                                                             |                                              |                                                           |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Citibank<br>6414 18th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                                             | <b>Purpose of Disbursement</b><br><br>Payroll taxes<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :     | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>798.25  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Andrew Hahn<br>215 West 10th Street<br><br>New York NY 10014                                                                                                                                                                  | <b>Purpose of Disbursement</b><br><br>Salary<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>6500.00 |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Nikki Fried<br>1840 52nd Street<br>Apt. 29<br>Brooklyn NY 11204                                                                                                                                                                | <b>Purpose of Disbursement</b><br><br>Salary<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>77.25   |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. John Paine<br>133 Henry Street<br><br>Brooklyn NY 11201                                                                                                                                                                       | <b>Purpose of Disbursement</b><br><br>Reimbursement<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :     | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>323.45  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Andrew Hahn<br>215 West 10th Street<br><br>New York NY 10014                                                                                                                                                                  | <b>Purpose of Disbursement</b><br><br>Reimbursement<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :     | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>244.00  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dear for Congress Inc.<br>5812 18th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                               | <b>Purpose of Disbursement</b><br><br>Petty Cash<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :        | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>500.00  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>154-23 96th Street<br><br>Howard Beach NY 11414                                                                                                                                                                  | <b>Purpose of Disbursement</b><br><br>Reimbursement<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :     | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>225.50  |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ben Axelroed<br>1386 East 15th Street<br><br>Brooklyn NY 11230                                                                                                                                                                | <b>Purpose of Disbursement</b><br><br>Reimbursement<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :     | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>97.41   |                                                                               |                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Cunningham Harris Associates<br>201 Grand Central Avenue<br><br>Ripley WV 25271                                                                                                                                                   | <b>Purpose of Disbursement</b><br><br>Services Rendered<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>07/29/1998 | <b>Amount of Each Disbursement This Period</b><br>8733.82 |                                                                               |                |
| <b>SUBTOTALS of Disbursements This Page (Optional)</b>                                                                                                                                                                                                                               |                                                                                                                                                                                                             |                                              |                                                           |                                                                               |                |
| <b>TOTALS This Period (last page this line number only)</b>                                                                                                                                                                                                                          |                                                                                                                                                                                                             |                                              |                                                           |                                                                               |                |

**SCHEDULE B**
**ITEMIZED DISBURSEMENTS**

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

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 FOR LINE NUMBER  
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**NAME OF COMMITTEE (in Full)**  
 Dear for Congress Inc.

|                                                                                                                                 |                                                                                                                                                                                                          |                                              |                                                             |
|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Secury Yours<br>2 Avenue I<br><br>Brooklyn NY 11230                          | <b>Purpose of Disbursement</b><br>Alarm Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):          | <b>Date (month, day, year)</b><br>07/28/1998 | <b>Amount of Each Disbursement This Period</b><br>2354.44   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>The Media Group Inc.<br>1480 Dublin Road<br><br>Columbus OH 43215            | <b>Purpose of Disbursement</b><br>Consulting Services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Date (month, day, year)</b><br>07/28/1998 | <b>Amount of Each Disbursement This Period</b><br>25774.79  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. John Paine<br>139 Henry Street<br><br>Brooklyn NY 11201                  | <b>Purpose of Disbursement</b><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Date (month, day, year)</b><br>07/28/1998 | <b>Amount of Each Disbursement This Period</b><br>1686.87   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Media Strategies<br>318 Massachusetts Avenue NE<br><br>Washington DC 20002   | <b>Purpose of Disbursement</b><br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Date (month, day, year)</b><br>07/28/1998 | <b>Amount of Each Disbursement This Period</b><br>600015.50 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>184-23 98th Street<br><br>Howard Beach NY 11414             | <b>Purpose of Disbursement</b><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Date (month, day, year)</b><br>07/31/1998 | <b>Amount of Each Disbursement This Period</b><br>904.48    |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Creststar Bank<br>1029 Parham Road<br><br>Richmond VA 23224                  | <b>Purpose of Disbursement</b><br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Date (month, day, year)</b><br>08/03/1998 | <b>Amount of Each Disbursement This Period</b><br>26110.40  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Josh Mellman<br>1496 East 18th Street<br><br>Brooklyn NY 11230           | <b>Purpose of Disbursement</b><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Date (month, day, year)</b><br>08/05/1998 | <b>Amount of Each Disbursement This Period</b><br>1250.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Flecher, Fischer and Berger<br>One Whitehall Street<br><br>New York NY 10004 | <b>Purpose of Disbursement</b><br>Legal Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Date (month, day, year)</b><br>08/05/1998 | <b>Amount of Each Disbursement This Period</b><br>7500.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Strubbe Oppel & Donovan<br>700 7th Street, SE<br><br>Washington DC 20003     | <b>Purpose of Disbursement</b><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Date (month, day, year)</b><br>08/05/1998 | <b>Amount of Each Disbursement This Period</b><br>11595.20  |
| <b>SUBTOTALS of Disbursements This Page (Optional)</b>                                                                          |                                                                                                                                                                                                          |                                              |                                                             |
| <b>TOTALS This Period (last page this line number only)</b>                                                                     |                                                                                                                                                                                                          |                                              |                                                             |

**SCHEDULE B****ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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**NAME OF COMMITTEE (In Full)**  
**Dear for Congress Inc.**

|                                                                                                                             |                                                                                                                                                                                                                      |                                              |                                                           |
|-----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>184-23 96th Street<br><br>Howard Beach NY 11414         | <b>Purpose of Disbursement</b><br><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                  | <b>Date (month, day, year)</b><br>08/05/1998 | <b>Amount of Each Disbursement This Period</b><br>225.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>184-23 96th Street<br><br>Howard Beach NY 11414         | <b>Purpose of Disbursement</b><br><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                  | <b>Date (month, day, year)</b><br>08/05/1998 | <b>Amount of Each Disbursement This Period</b><br>154.62  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Roth & Company<br>5812 18th Avenue<br><br>Brooklyn NY 11204              | <b>Purpose of Disbursement</b><br><br>Professional Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>08/06/1998 | <b>Amount of Each Disbursement This Period</b><br>1753.75 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>The Wildet Group LLC<br>127 Riverside Drive, #2<br><br>New York NY 10024 | <b>Purpose of Disbursement</b><br><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :              | <b>Date (month, day, year)</b><br>08/08/1998 | <b>Amount of Each Disbursement This Period</b><br>3094.83 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Malika Sukanik<br>85-21 124th Street<br><br>Kew Gardens NY 11415      | <b>Purpose of Disbursement</b><br><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :              | <b>Date (month, day, year)</b><br>08/08/1998 | <b>Amount of Each Disbursement This Period</b><br>2000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Scott Garrison<br>889 Parkstone Drive<br><br>Stone Mountain GA 30083 | <b>Purpose of Disbursement</b><br><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                  | <b>Date (month, day, year)</b><br>08/06/1998 | <b>Amount of Each Disbursement This Period</b><br>71.59   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Perry Vais<br>2880 E 28th Street<br><br>Brooklyn NY 11275            | <b>Purpose of Disbursement</b><br><br>Computer Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :     | <b>Date (month, day, year)</b><br>08/05/1998 | <b>Amount of Each Disbursement This Period</b><br>2125.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Suzanne Stakofsky<br>95 Salvo Loop<br><br>Staten Island NY 10309      | <b>Purpose of Disbursement</b><br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                         | <b>Date (month, day, year)</b><br>08/07/1998 | <b>Amount of Each Disbursement This Period</b><br>1350.68 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Ms Suzanne Stakofsky<br>95 Salvo Loop<br><br>Staten Island NY 10309      | <b>Purpose of Disbursement</b><br><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                  | <b>Date (month, day, year)</b><br>08/07/1998 | <b>Amount of Each Disbursement This Period</b><br>26.95   |
| <b>SUBTOTALS of Disbursements This Page (Optional)</b> .....                                                                |                                                                                                                                                                                                                      |                                              |                                                           |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                           |                                                                                                                                                                                                                      |                                              |                                                           |

| <b>SCHEDULE B</b>                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                  | <b>ITEMIZED DISBURSEMENTS</b>                                           |                                                    | 51 / 65               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------|-----------------------|
|                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                  | Use separate schedule(s) for each category of the Detailed Summary Page |                                                    | FOR LINE NUMBER<br>17 |
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| NAME OF COMMITTEE (in Full)<br>Dear for Congress Inc.                                                                                                                                                                                                                                |                                                                                                                                                                                                  |                                                                         |                                                    |                       |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Alex Lutz<br>164-23 86th Street<br><br>Howard Beach NY 11414                                                                                                                                                                         | Purpose of Disbursement<br><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :     | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>390.84  |                       |
| Full Name, Mailing Address, and ZIP Code<br>Ma Raquel Mabut<br>1654 East 4th Street<br><br>Brooklyn NY 11230                                                                                                                                                                         | Purpose of Disbursement<br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>225.00  |                       |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Jamie Barach<br>1308 Avenue O<br><br>Brooklyn NY 11230                                                                                                                                                                               | Purpose of Disbursement<br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>351.00  |                       |
| Full Name, Mailing Address, and ZIP Code<br>Mr. A.J. Shifer<br>477 18th Street<br><br>Brooklyn NY 11204                                                                                                                                                                              | Purpose of Disbursement<br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>390.00  |                       |
| Full Name, Mailing Address, and ZIP Code<br>Ma Nikki Fried<br>1840 52nd Street<br>Apt. 20<br>Brooklyn NY 11204                                                                                                                                                                       | Purpose of Disbursement<br><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>485.00  |                       |
| Full Name, Mailing Address, and ZIP Code<br>Cunningham Harris Associates<br>201 Grand Central Avenue<br><br>Ripley WV 25271                                                                                                                                                          | Purpose of Disbursement<br><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>725.00  |                       |
| Full Name, Mailing Address, and ZIP Code<br>Bell Atlantic<br>P.O. Box 1100<br><br>Albany NY 12250                                                                                                                                                                                    | Purpose of Disbursement<br><br>Phone Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :    | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>1449.07 |                       |
| Full Name, Mailing Address, and ZIP Code<br>Federal Express<br>P.O. Box 1140<br><br>Memphis TN 38101                                                                                                                                                                                 | Purpose of Disbursement<br><br>Postage Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :  | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>40.25   |                       |
| Full Name, Mailing Address, and ZIP Code<br>Dear for Congress Inc.<br>5612 16th Avenue<br><br>Brooklyn NY 11204                                                                                                                                                                      | Purpose of Disbursement<br><br>Petty Cash<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :        | Date (month, day, year)<br>08/07/1998                                   | Amount of Each Disbursement This Period<br>287.32  |                       |
| SUBTOTALS of Disbursements This Page (Optional)                                                                                                                                                                                                                                      |                                                                                                                                                                                                  |                                                                         |                                                    |                       |
| TOTALS This Period (last page this line number only)                                                                                                                                                                                                                                 |                                                                                                                                                                                                  |                                                                         |                                                    |                       |

**SCHEDULE B**
**ITEMIZED DISBURSEMENTS**

 Use separate schedule(s)  
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**NAME OF COMMITTEE (In Full)**  
**Dear for Congress Inc.**

|                                                                                                                                   |                                                                                                                                                                                                                |                                              |                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>United States Postmaster Brooklyn<br>6618 20th Avenue<br><br>Brooklyn NY 11204 | <b>Purpose of Disbursement</b><br>Postage<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                      | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Disbursement This Period</b><br>640.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Josh Mellman<br>1456 East 10th Street<br><br>Brooklyn NY 11230             | <b>Purpose of Disbursement</b><br>Services Rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Disbursement This Period</b><br>2500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>164-23 98th Street<br><br>Howard Beach NY 11414               | <b>Purpose of Disbursement</b><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Disbursement This Period</b><br>100.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Ben Axelrod<br>1356 East 15th Street<br><br>Brooklyn NY 11230              | <b>Purpose of Disbursement</b><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Disbursement This Period</b><br>107.44   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Federal Express<br>P.O. Box 1140<br><br>Memphis TN 38101                       | <b>Purpose of Disbursement</b><br>Mailing Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :             | <b>Date (month, day, year)</b><br>08/12/1998 | <b>Amount of Each Disbursement This Period</b><br>552.50   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Mark Gelb<br>976 52nd Street<br><br>Brooklyn NY 11219                      | <b>Purpose of Disbursement</b><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Disbursement This Period</b><br>432.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Stearns Consulting Inc.<br>174 Ripley Street<br><br>San Francisco CA 94110     | <b>Purpose of Disbursement</b><br>Consulting Services rendered<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>08/14/1998 | <b>Amount of Each Disbursement This Period</b><br>53216.06 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>164-23 98th Street<br><br>Howard Beach NY 11414               | <b>Purpose of Disbursement</b><br>Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | <b>Date (month, day, year)</b><br>08/15/1998 | <b>Amount of Each Disbursement This Period</b><br>904.46   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Alex Lutz<br>164-23 98th Street<br><br>Howard Beach NY 11414               | <b>Purpose of Disbursement</b><br>Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                | <b>Date (month, day, year)</b><br>08/17/1998 | <b>Amount of Each Disbursement This Period</b><br>239.49   |
| <b>SUBTOTALS of Disbursements This Page (Optional)</b>                                                                            |                                                                                                                                                                                                                |                                              |                                                            |
| <b>TOTALS This Period (last page this line number only)</b>                                                                       |                                                                                                                                                                                                                |                                              |                                                            |

**SCHEDULE B****ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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**NAME OF COMMITTEE (in Full)**  
**Dear for Congress Inc.**

| Full Name, Mailing Address, and ZIP Code                                                                                    | Purpose of Disbursement                                                                                                                                             | Date (month, day, year) | Amount of Each Disbursement This Period |
|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| Mr. John Paine<br>133 Henry Street<br><br>Brooklyn NY 11201                                                                 | Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | 08/17/1998              | 309.88                                  |
| Full Name, Mailing Address, and ZIP Code<br>Cunningham Harris Associates<br>201 Grand Central Avenue<br><br>Ripley WV 25271 | Reimbursements<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | 08/17/1998              | 58.34                                   |
| Full Name, Mailing Address, and ZIP Code<br>Mr. Scott Garrison<br>869 Parkstone Drive<br><br>Stone Mountain GA 30083        | Reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | 08/17/1998              | 81.62                                   |
| Full Name, Mailing Address, and ZIP Code<br>Con Edison<br>Jaf Station<br>P.O. Box 1702<br>New York NY 10118                 | Electrical Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | 08/17/1998              | 425.00                                  |
| Full Name, Mailing Address, and ZIP Code<br>EAB<br>P.O. Box 21889<br><br>Tulsa OK 74121                                     | Credit Card Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | 08/17/1998              | 492.95                                  |
| Full Name, Mailing Address, and ZIP Code<br>Queens Ledger Newspaper<br>55-31 69th Street<br><br>Maspeth NY 11378            | Advertising<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):          | 08/17/1998              | 988.00                                  |
| Full Name, Mailing Address, and ZIP Code<br>The Wave Publishing Company<br>P.O. Box 930097<br><br>Rockaway Beach NY 11693   | Advertising<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):          | 08/17/1998              | 784.00                                  |
| Full Name, Mailing Address, and ZIP Code<br>Ms Suzanne Stakofsky<br>95 Salvo Loop<br><br>Staten Island NY 10308             | Salary<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):               | 08/18/1998              | 485.44                                  |
| Full Name, Mailing Address, and ZIP Code<br>Sprint Communications<br>P.O. Box 740504<br><br>Atlanta GA 30374                | Phone Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | 08/20/1998              | 133.61                                  |
| <b>SUBTOTALS of Disbursements This Page (Optional)</b>                                                                      |                                                                                                                                                                     |                         |                                         |
| <b>TOTALS This Period (last page this line number only)</b>                                                                 |                                                                                                                                                                     |                         |                                         |

**SCHEDULE B****ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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**NAME OF COMMITTEE (in Full)**  
**Dear for Congress Inc.**

|                                                                                                                                          |                                                                                                                                                                                                        |                                              |                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Mr. Andrew Hahn<br>215 West 10th Street<br><br>New York NY 10014                      | <b>Purpose of Disbursement</b><br>Reimbursements<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :       | <b>Date (month, day, year)</b><br>08/20/1998 | <b>Amount of Each Disbursement This Period</b><br>328.43   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>City Imprint Inc.<br>627 Greenwich Street<br>8th Floor<br>New York NY 10014           | <b>Purpose of Disbursement</b><br>Printing Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :    | <b>Date (month, day, year)</b><br>08/20/1998 | <b>Amount of Each Disbursement This Period</b><br>1800.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>EAB<br>P.O. Box 21969<br><br>Tulsa OK 74121                                           | <b>Purpose of Disbursement</b><br>Credit Card Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>08/21/1998 | <b>Amount of Each Disbursement This Period</b><br>2072.20  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>New York City Business West Inc.<br>1361 Coney Island Avenue<br><br>Brooklyn NY 11230 | <b>Purpose of Disbursement</b><br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                     | <b>Date (month, day, year)</b><br>08/21/1998 | <b>Amount of Each Disbursement This Period</b><br>500.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Stearns Consulting Inc.<br>174 Ripley Street<br><br>San Francisco CA 94110            | <b>Purpose of Disbursement</b><br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                     | <b>Date (month, day, year)</b><br>08/21/1998 | <b>Amount of Each Disbursement This Period</b><br>62904.25 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>United States Postmaster Brooklyn<br>6618 20th Avenue<br><br>Brooklyn NY 11204        | <b>Purpose of Disbursement</b><br>Postage<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :              | <b>Date (month, day, year)</b><br>08/24/1998 | <b>Amount of Each Disbursement This Period</b><br>2500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Franklin's Printing<br>1844 Flatbush Avenue<br><br>Brooklyn NY 11210                  | <b>Purpose of Disbursement</b><br>Printing Expenses<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :    | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Disbursement This Period</b><br>2000.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dear for Congress Inc.<br>5612 18th Avenue<br><br>Brooklyn NY 11204                   | <b>Purpose of Disbursement</b><br>Petty Cash<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :           | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Disbursement This Period</b><br>299.47   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dear for Congress Inc.<br>5612 18th Avenue<br><br>Brooklyn NY 11204                   | <b>Purpose of Disbursement</b><br>Petty Cash<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :           | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Disbursement This Period</b><br>300.00   |
| <b>SUBTOTALS of Disbursements This Page (Optional)</b> .....                                                                             |                                                                                                                                                                                                        |                                              |                                                            |
| <b>TOTALS This Period (last page this line number only)</b> .....                                                                        |                                                                                                                                                                                                        |                                              |                                                            |



**SCHEDULE B**
**ITEMIZED DISBURSEMENTS**

 Use separate schedule(s)  
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**NAME OF COMMITTEE (In Full)**  
**Dear for Congress Inc.**

|                                                                                                                               |                                                                                                                                                                                                       |                                              |                                                            |
|-------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------|
| <b>Full Name, Mailing Address, and ZIP Code</b><br>The Rockaway Point News<br>P.O. Box 164<br><br>Fort Tilden NY 11695        | <b>Purpose of Disbursement</b><br><br>Advertising<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Disbursement This Period</b><br>375.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Western Queens Gazette<br>42-18 34th Avenue<br><br>Astoria NY 11101        | <b>Purpose of Disbursement</b><br><br>Advertising<br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Disbursement This Period</b><br>420.00   |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Stearns Consulting Inc.<br>174 Ripley Street<br><br>San Francisco CA 94110 | <b>Purpose of Disbursement</b><br><br><br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | <b>Date (month, day, year)</b><br>08/25/1998 | <b>Amount of Each Disbursement This Period</b><br>53851.13 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Stearns Consulting Inc.<br>174 Ripley Street<br><br>San Francisco CA 94110 | <b>Purpose of Disbursement</b><br><br><br><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :            | <b>Date (month, day, year)</b><br>08/26/1998 | <b>Amount of Each Disbursement This Period</b><br>58013.22 |

**SUBTOTALS of Disbursements This Page (Optional)**
**TOTALS This Period (last page this line number only)**
**1047439.45**

## Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

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