

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC 10 A 11: 36

1. NAME OF COMMITTEE (If null)

McNulty For Congress

ADDRESS (number and street) Check if different than previously reported.
P.O. Box 1560

CITY, STATE and ZIP CODE STATE/DISTRICT
Green Island, NY 12183

2. FEC IDENTIFICATION NUMBER

C00230417

3. IS THIS REPORT AN AMENDMENT?

YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- Thirtieth day report following the General Election on 11/07/2000 in the State of NY
- Termination Report

This report contains activity for

- Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period <u>10/19/2000</u> through <u>11/27/2000</u>	COLUMN A This Period	COLUMN B Calendar Year-to-date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$70725.00	\$228910.00
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$70725.00	\$228910.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$13587.63	\$120780.40
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$13587.63	\$120780.40
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$385024.33	
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:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9630
Local 202-218-3420

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
John J. McNulty III

Signature of Treasurer [Signature] Date December 6, 2000

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

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Detailed Summary Page
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) McNulty For Congress	Report Covering the Period: From: 10/19/2000 To: 11/27/2000	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$23425.00	
(ii) Unitemized	\$13125.00	
(iii) Total of contributions from individual	\$36550.00	\$88035.00
(b) Political Party Committees	\$3890.00	\$6750.00
(c) Other Political Committees (such as PACs)	\$30375.00	\$134125.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	\$70725.00	\$228910.00
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.)	\$2395.86	\$14150.76
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$73120.86	\$243060.76
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$13587.63	\$120780.40
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	\$10486.50	\$43135.90
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$24086.13	\$163916.30
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$335888.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$73120.66
25. SUBTOTAL (add Line 23 and Line 24)		\$409009.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$24086.13
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$384923.33

SCHEDULE A

ITEMIZED RECEIPTS

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

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)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code Mark Anthonie 147 Johnson Rd Auburn, ME 04210-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Healey & Associates, Inc.</p> <p>Occupation President / CEO</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/19/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Daniel Bayly P.O. Box 321 Troy, NY 12187-0321</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer NYS Assembly</p> <p>Occupation Supt-NYS Assembly Bldgs.</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>C. Full Name, Mailing Address and Zip Code Jim Mehta 465 Sickle Hill Road Borne, NY 12023-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Albany Engineering Corp.</p> <p>Occupation Engineer</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. Full Name, Mailing Address and Zip Code Russell Brooks 1918 E. Country Club Drive Schenectady, NY 12309-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Case, Window & Door, LLC</p> <p>Occupation Principal</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>E. Full Name, Mailing Address and Zip Code Jack Brown 3 Center Court Green Island, NY 12183-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Village of Green Island</p> <p>Occupation Public Administration</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>F. Full Name, Mailing Address and Zip Code James Bulmer 609 25th St. Watervliet, NY 12189-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer City of Watervliet</p> <p>Occupation Foreman</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>G. Full Name, Mailing Address and Zip Code Chungchin Chen 4 Flicker Drive Latham, NY 12110-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer CORPC</p> <p>Occupation <i>Will. Paul Baker Smith</i></p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/21/200</p>	<p>Amount of Each Receipt this Period \$200.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$1575.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code Edward Clark 263 Remsen Street Cohoes, NY 12047-4412 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Retired Occupation 	Date (month, day, year) 10/24/200 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$125.00
B. Full Name, Mailing Address and Zip Code Tory Clemente 50 Farrell Road Troy, NY 12182- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Bonded Concrete, Inc. Occupation Owner	Date (month, day, year) 10/24/200 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$125.00
C. Full Name, Mailing Address and Zip Code Stephen Coffey, Sr. 4 Sampson Avenue Troy, NY 12180- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer City of Troy Occupation Civil Service Commissioner	Date (month, day, year) 10/24/200 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$125.00
D. Full Name, Mailing Address and Zip Code Joseph Condon 48 Glenwood Rd. Menands, NY 12204- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Self Occupation Broadcasting / Public Relation	Date (month, day, year) 10/24/200 Aggregate Year-to-Date -> \$450.00	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and Zip Code John Conroy 77 S. Lake Ave. Troy, NY 12180- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer NYS Dept. of Health Occupation Administrator	Date (month, day, year) 10/26/200 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$125.00
F. Full Name, Mailing Address and Zip Code Gerald Conway 8 114th Street Troy, NY 12182- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer City of Troy Occupation Code Enforcement	Date (month, day, year) 10/30/200 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$125.00
G. Full Name, Mailing Address and Zip Code James Cruceiti 85 Hampton Street Delmar, NY 12054- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Name of Employer Albany Co. Health Department Occupation Physician	Date (month, day, year) 10/30/200 Aggregate Year-to-Date -> \$225.00	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$925.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full) McNulty For Congress			
A. Full Name, Mailing Address and Zip Code Dr. Thomas E. D'Ambra 370 Riverview Road Rexford, NY 12146- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Albany Molecular Research, Inc Occupation CEO	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$1000.00
B. Full Name, Mailing Address and Zip Code Leo P. Dean 13 Davis Avenue Albany, NY 12203- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Will send when available	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00 Aggregate Year-to-Date -> \$250.00
C. Full Name, Mailing Address and Zip Code Adam Del Torto 57 Summit Ave. Albany, NY 12209- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Albany County Occupation Government Employee	Date (month, day, year) 10/25/200	Amount of Each Receipt this Period \$125.00 Aggregate Year-to-Date -> \$225.00
D. Full Name, Mailing Address and Zip Code Peter Desfosses 174 Rosemont Street Albany, NY 12206- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Albany Common Council Occupation President	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00 Aggregate Year-to-Date -> \$250.00
E. Full Name, Mailing Address and Zip Code Albert Desmoines 20 Marquis Dr. Slingerlands, NY 12159-9316 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Will send when available	Date (month, day, year) 10/20/200	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00
F. Full Name, Mailing Address and Zip Code Thomasine DiFabio 75 West Street Green Island, NY 12183- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation	Date (month, day, year) 10/30/200	Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date -> \$225.00
G. Full Name, Mailing Address and Zip Code Francis Dimond P.O. Box 328 Honda, NY 12068-0328 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Will send when available	Date (month, day, year) 10/27/200	Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date -> \$225.00

SUBTOTAL of Receipts This Page (optional)	\$1575.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate entries (list) for each category of the detailed primary page

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NAME OF COMMITTEE (In Full) McNulty For Congress			
A. Full Name, Mailing Address and Zip Code John Egan 1127 Krumkill Road Sitogerlands, NY 12159-	Name of Employer Albany Airport Authority Occupation CEO	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
B. Full Name, Mailing Address and Zip Code Marilyn D. Fane 62 Leversse Road Troy, NY 12182-	Name of Employer Self Occupation Excavating Contractor	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
C. Full Name, Mailing Address and Zip Code John Ferraro 3 Amity Pointe Ct. Clifton Park, NY 12065-	Name of Employer Hematology Oncology Associates Occupation Physician	Date (month, day, year) 10/30/200	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
D. Full Name, Mailing Address and Zip Code Theresa Files 15 Hudson Ave. Green Island, NY 12183-	Name of Employer Park Hotel Occupation Owner	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$225.00		
E. Full Name, Mailing Address and Zip Code Theresa Files 15 Hudson Ave. Green Island, NY 12183-	Name of Employer Park Hotel Occupation Owner	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$350.00		
F. Full Name, Mailing Address and Zip Code Michael Fleming 25 Schuyler Hills Rd. Loudonville, NY 12211-	Name of Employer Retired Occupation	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$225.00		
G. Full Name, Mailing Address and Zip Code Frances Forcucci 2425 3rd Ave. Watervliet, NY 12189-	Name of Employer Retired Occupation Retired	Date (month, day, year) 10/25/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		

SUBTOTAL of Receipts This Page (optional)	\$1175.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Forner 18 Ternan Ave. East Greenbush, NY 12061-	Retired	10/26/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	Aggregate Year-to-Date -> \$250.00	
Theresa Fulgan 20 George Street Green Island, NY 12153-	Retired	10/25/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	Aggregate Year-to-Date -> \$250.00	
Joyce Galante 53 Second Street Troy, NY 12181-	Self	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	Aggregate Year-to-Date -> \$250.00	
Francesco Galea P.O. Box 98 Guilford Center, NY 12095-	Galea Group	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Chairman	Aggregate Year-to-Date -> \$375.00	
Christopher Gardner 46 Warwick Way Schenectady, NY 12309-	Council 82	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	Aggregate Year-to-Date -> \$250.00	
Ruben Gersowitz 11 N. Pearl St. Suite 1608 Albany, NY 12207-	C.G.T. Associates, LLC	10/24/200	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Owner	Aggregate Year-to-Date -> \$500.00	
Andrew Gigliotti 604 Manning Blvd Albany, NY 12210-	Lasak & Gigliotti, Inc.	10/24/200	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Funeral Director	Aggregate Year-to-Date -> \$350.00	

SUBTOTAL of Receipts This Page (optional)	\$1125.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin Glasheen 115 Spring Ave. Troy, NY 12180-	Niagara Mohawk Occupation lawyer	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
Neil Golub 1021 Rosendale Rd. Schenectady, NY 12309-	Price Chopper Occupation President	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$375.00
Jesse Gottlieb 342 Madison Ave., Suite 1925 New York, NY 10173-	American Insurance Consultants Occupation Insurance	10/24/200	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
Kent Gray 135 Putnam Rd. Schenectady, NY 12306-	NYS Education Department Occupation Education	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
Sol Greenberg 181 Lenox Ave. Albany, NY 12208-	Retired Occupation lawyer	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
James Grenier 571 Third Ave. Troy, NY 12182-	Freihofers Occupation Mechanic	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
Mark Heller 33 Aspinwall Road Loudonville, NY 12211-	Cooper, Erving, Savage, Nolan Occupation Attorney	10/26/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code Daniel Hershberg 20 Valley View Drive Albany, NY 12208- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hershberg & Hershberg	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
	Occupation Civil Engineer	Aggregate Year-to-Date -> \$250.00	
B. Full Name, Mailing Address and Zip Code F. Stanley Hoffmeister 7 Reddy Lane Loudonville, NY 12211- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Stratton VA Medical Center	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$100.00
	Occupation Medical Doctor	Aggregate Year-to-Date -> \$200.00	
C. Full Name, Mailing Address and Zip Code Charles Houghtaling 25 New Scotland Ave. Feura Bush, NY 12067- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Albany County	Date (month, day, year) 10/30/200	Amount of Each Receipt this Period \$100.00
	Occupation County Legislator	Aggregate Year-to-Date -> \$200.00	
D. Full Name, Mailing Address and Zip Code George Infante 9 Mc Donald Rd. Albany, NY 12209- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Albany County	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
	Occupation County Legislator	Aggregate Year-to-Date -> \$250.00	
E. Full Name, Mailing Address and Zip Code Sharon Jordan 1055 Breirwood Blvd. Schenectady, NY 12300- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Schenectady Municipal Housing	Date (month, day, year) 10/25/200	Amount of Each Receipt this Period \$500.00
	Occupation Administrator	Aggregate Year-to-Date -> \$700.00	
F. Full Name, Mailing Address and Zip Code William Joyce 67 Lincoln Avenue Amstordam, NY 12010-2420 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer NYS Comm. of Corr.	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$25.00
	Occupation Facility Planner	Aggregate Year-to-Date -> \$250.00	
G. Full Name, Mailing Address and Zip Code Charles Judeman 85 Queens Drive Schenectady, NY 12304- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
	Occupation	Aggregate Year-to-Date -> \$250.00	

SUBTOTAL of Receipts This Page (optional)	\$1200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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 sources.

NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code Michael Kaleel 77 Franklin Street, Suite 509 Boston, MA 02110-	Name of Employer The Kaleel Company Occupation Insurance	Date (month, day, year) 10/25/200	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$200.00		
B. Full Name, Mailing Address and Zip Code John Kearney 119 Palmer Drive Ravena, NY 12143-	Name of Employer Bud Kearney Inc Occupation Auto Dealer	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
C. Full Name, Mailing Address and Zip Code Thomas Kenney 33 Second St. Troy, NY 12180-	Name of Employer Self Occupation lawyer	Date (month, day, year) 10/27/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
D. Full Name, Mailing Address and Zip Code Ronald Leberge 8 Pepper Lane Loudonville, NY 12211-	Name of Employer Laberge Eng. & Consulting Grp Occupation Consultant	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$225.00		
E. Full Name, Mailing Address and Zip Code Peter Lamparello, MD 49 Martin Drive Feura Bush, NY 12067-	Name of Employer Hematology Oncology Associates Occupation Physician	Date (month, day, year) 10/27/200	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
F. Full Name, Mailing Address and Zip Code Maureen Lanahan 340 Riverview Road Rexford, NY 12148-	Name of Employer Town of Clifton Park Occupation Court Clerk	Date (month, day, year) 10/26/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
G. Full Name, Mailing Address and Zip Code Frank Lazzaro 179 George St. Green Island, NY 12183-	Name of Employer Village of Green Island Occupation Assessor	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		

SUBTOTAL of Receipts This Page (optional)	\$1050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information reported 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)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code Mrs. Donald Led Duke P.O. Box 12709 Albany, NY 12212-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Housewife</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 10/25/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Joseph Legnard 34 Walden Glen Ballston Lake, NY 12019-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Jerome Lindberg 100 E. Washington St., 5th Fl. White Memorial Bldg. Syracuse, NY 13202-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Underwriter</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/22/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. Full Name, Mailing Address and Zip Code William Coetterle III 21 Rice Road Rensselaerville, NY 12147-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Coroner</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>E. Full Name, Mailing Address and Zip Code James Long 66B Central Ave. Albany, NY 12206-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code George Maherjian 1058 Valerie Drive Niskayuna, NY 12309-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Owner</p> <p>Aggregate Year-to-Date -> \$450.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>G. Full Name, Mailing Address and Zip Code David Malkin 15 Canoe Brook Drive Livingston, NJ 07039-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Insurance</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$200.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$2525.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

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 sources.

NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code Esther Massry 2 Cobble Hill Rd. Loudonville, NY 12211- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Real Estate Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code James McCaffrey 123 South Pine Avenue Albany, NY 12208- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer City of Albany Occupation Will send when available Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
C. Full Name, Mailing Address and Zip Code Michael McDonald 876 Second Ave. Troy, NY 12182- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer P.P. McDonald & Son Occupation Funeral Director Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 10/25/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Brian McNulty 16 New Castle Road Clifton Park, NY 12065- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Educational Administration Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
E. Full Name, Mailing Address and Zip Code Stanley Metzner 22 Milner Ave. Albany, NY 12203-2020 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Armory Automotive Family Occupation Auto Dealer Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
F. Full Name, Mailing Address and Zip Code Laurie Michaels 301 Commerce Street Fort Worth, TX 76102- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Psychologist Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 11/01/200	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Mihran Mooradian 60 East Rd. Troy, NY 12180- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mooradian's Occupation Retailer Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$1475.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the related summary page

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Mooradian 16 Aspen Ln. Clifton Park, NY 12065-	Mooradian's Occupation: Owner	10/27/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
John Nigro 12 W. Cobble Hill Rd. Loudonville, NY 12211-	Nigro Companies Occupation: Owner	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
Howard Nolan 33 No. Pearl St. Albany, NY 12202-	Delaware Plaza Associates Occupation: Lawyer	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$625.00	
Folly Noonan 4 Noonan Lane Albany, NY 12209-	Retired Occupation:	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
Frank O'Brien 75 State Street Albany, NY 12207-	Fuller & O'Brien Occupation: Owner	10/24/200	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$750.00	
Michael O'Connor 31 Princess Lane Loudonville, NY 12211-	O'Connor, O'Connor, Mayberger & Occupation: Attorney	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$225.00	
Thomas O'Connor 1 W. Cobble Hill Road Loudonville, NY 12211-	Mohawk Paper Mills, Inc. Occupation: Chairman	10/24/200	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$500.00	

SUBTOTAL of Receipts This Page (optional)	\$1375.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information copied from prior reports and statements may not be seen 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)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code Ted O'Hara 1273 Stratford Road Schenectady, NY 12308-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Insurance Agent</p>	<p>Date (month, day, year) 10/25/200</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Dennis O'Malley 2228 Mudge Road Delanson, NY 12053-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Traffic Engineer</p>	<p>Date (month, day, year) 10/21/200</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>C. Full Name, Mailing Address and Zip Code John Patrick 23 Norwich Circle Siceville, MI 32576-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer FUJIFILM</p> <p>Occupation Attorney</p>	<p>Date (month, day, year) 10/26/200</p> <p>Aggregate Year-to-Date -> \$1500.00</p>	<p>Amount of Each Receipt this Period \$875.00</p>
<p>D. Full Name, Mailing Address and Zip Code Mary Pfeifer 16 Milner Ave. Albany, NY 12203-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer NYS Office of Family & Childr.</p> <p>Occupation Program Administrator</p>	<p>Date (month, day, year) 10/26/200</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code William Picotte Picotte Companies 20 Corporate Woods Blvd. Albany, NY 12211-2370</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Picotte Companies</p> <p>Occupation Real Estate</p>	<p>Date (month, day, year) 10/26/200</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>F. Full Name, Mailing Address and Zip Code Louis Pelsinello 438 Aiken Ave. Rensselaer, NY 12144-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Pelsinello Fuels, Inc.</p> <p>Occupation Owner</p>	<p>Date (month, day, year) 10/24/200</p> <p>Aggregate Year-to-Date -> \$125.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>G. Full Name, Mailing Address and Zip Code Louis Pelsinello 438 Aiken Ave. Rensselaer, NY 12144-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Pelsinello Fuels, Inc.</p> <p>Occupation Owner</p>	<p>Date (month, day, year) 10/24/200</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$2475.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Purcell 819 State Street Schenectady, NY 12307-1213	Goode Police Equipment	10/24/200	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Invoice Processor		
	Aggregate Year-to-Date ->	\$250.00	
Francis Seal 189 George St. Green Island, NY 12183-	Retired	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	\$375.00	
Michael Reardon 21 Taylor St. Cohoes, NY 12047-	Albany County	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Auditor		
	Aggregate Year-to-Date ->	\$250.00	
George Reinoschl 76 Hudson Ave. Green Island, NY 12103-	Retired	10/26/200	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	\$500.00	
Donald Reutemann 11 Biscayne Drive Latham, NY 12110-	Kelly Clothes, Inc.	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation OWNER		
	Aggregate Year-to-Date ->	\$250.00	
Thomas Robert 142 Paine St. Green Island, NY 12189-	NYS Education Department	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Architect		
	Aggregate Year-to-Date ->	\$250.00	
Susan Russell 1224 19th Street Watervliet, NY 12189-	Retired	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$250.00	

SUBTOTAL of Receipts This Page (optional)	\$1125.00
TOTAL 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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NAME OF COMMITTEE (In Full)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code Mike Russo GMP Local 77 110 Ketcham Road Voorheesville, NY 12186-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer GMP Local 77</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>B. Full Name, Mailing Address and Zip Code John Scarchilli 111 Latham Ridge Road Latham, NY 12110-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Pioneer Savings Bank</p> <p>Occupation Pres. and CEO</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>C. Full Name, Mailing Address and Zip Code Martin Scher 136 No. Lake Ave. Albany, NY 12206-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer M. Scher & Son, Inc.</p> <p>Occupation Electrical Contractor</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>D. Full Name, Mailing Address and Zip Code John Shea 23 Hamilton Street Cohoes, NY 12047-1909</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer City of Cohoes</p> <p>Occupation Director Code Enforcement</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>E. Full Name, Mailing Address and Zip Code Donald Sigmund 5225 Wisconsin Ave., NW, Ste 503 Washington, DC 20015-2614</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Wolf and Cohen</p> <p>Occupation Insurance</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Date (month, day, year) 10/20/200</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>F. Full Name, Mailing Address and Zip Code Eugene Spada 167 Everett Road Albany, NY 12235-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$375.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and Zip Code Kevin Stewart 69 Denison Road Schenectady, NY 12309-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Will send when available</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code Edward Swyer 6138 Nott Road Guilderland, NY 12084-	Name of Employer The Swyer Companies Occupation Real Estate Developer	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
B. Full Name, Mailing Address and Zip Code Mary Teresi 43 Winne Road Delmar, NY 12054-	Name of Employer St. Thomas School Occupation Teacher	Date (month, day, year) 10/25/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
C. Full Name, Mailing Address and Zip Code Michael Verdile 33 Brickyard Road Troy, NY 12182-	Name of Employer Self Occupation Restauranteur	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
D. Full Name, Mailing Address and Zip Code Kenneth Weafer 66 Ryckman Ave. Albany, NY 12206-	Name of Employer Retired Occupation	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
E. Full Name, Mailing Address and Zip Code Candace Weir 414 Loudonville Road Loudonville, NY 12211-	Name of Employer CL King & Associates, Inc Occupation President	Date (month, day, year) 10/24/200	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$750.00		
F. Full Name, Mailing Address and Zip Code Charles Weissman, MD 14 Shaker Bay Rd. Ithaca, NY 14850-	Name of Employer Hematology Oncology Associates Occupation Physician	Date (month, day, year) 10/28/200	Amount of Each Receipt this Period \$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$400.00		
G. Full Name, Mailing Address and Zip Code Michael Wilton 36 Stockbridge Road Slingerlands, NY 12159-	Name of Employer Hematology Oncology Associates Occupation Physician	Date (month, day, year) 10/27/200	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		

SUBTOTAL of Receipts This Page (optional)	\$1525.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Pay information reported 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)
 McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Witko 20 St. Agnes Lane Loudonville, NY 12211-	Fort Orange Press Occupation Chairman	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
Thomas Wu 74 Huntersfield Road Delmar, NY 12054-	V.A. Hospital Occupation Medical Doctor	10/21/200	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00		
Ira Zackon 39 Princess Lane Loudonville, NY 12211-	Hematology Oncology Associates Occupation Physician	10/27/200	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
Richard Zandri 36 Cobble Hill Road Loudonville, NY 12211-	Zandri Construction Corp. Occupation President	10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
Frank Zeronda 15 Lyons Ave. Delmar, NY 12054-	Self Occupation Civil Engineer	10/24/200	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$1750.00
TOTAL This Period (last page this line number only)	\$23425.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the detailed summary page

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

NAME OF COMMITTEE (In Full)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code Friends of Mayor Jennings P.O. Box 7103 Albany, NY 12224-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> \$750.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Canestrari for Assembly Committee 16 Roosevelt Blvd. Cohoes, NY 12047-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>C. Full Name, Mailing Address and Zip Code Colonie Democratic Committee P.O. Box 12412 Albany, NY 12212-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>D. Full Name, Mailing Address and Zip Code Friends of Phil Stack 39 N. Pearl Street Albany, NY 12207-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> \$125.00</p>	<p>Date (month, day, year) 10/25/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>E. Full Name, Mailing Address and Zip Code Committee to Elect Bob Angelini 20 Tanners Lane Rensselaer, NY 12144-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> \$125.00</p>	<p>Date (month, day, year) 10/25/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>F. Full Name, Mailing Address and Zip Code McDonald For Mayor 1 Randolph Street Cohoes, NY 12047-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>G. Full Name, Mailing Address and Zip Code Lynne Mahoney For County Legislature 2707 15th Street Troy, NY 12180-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> \$175.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$1250.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information copied from such Reports and Statements may not be 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)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code Friends of Paul Clyre 24 Huntersfield Road Delmar, NY 12054-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 10/26/200</p> <p>10/26/200</p> <p>\$125.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>B. Full Name, Mailing Address and Zip Code Guilderland Democratic Committee Box 741 Guilderland, NY 12084-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 10/26/200</p> <p>10/26/200</p> <p>\$125.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>C. Full Name, Mailing Address and Zip Code Friends of Senator Neil Breslin 15 Pinedale Ave. Delmar, NY 12054-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 10/25/200</p> <p>10/25/200</p> <p>\$125.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>D. Full Name, Mailing Address and Zip Code Albany County Democratic Committee 22 Colvin Ave. Albany, NY 12206-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 10/24/200</p> <p>10/24/200</p> <p>\$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>E. Full Name, Mailing Address and Zip Code Committee to Keep Campbell Sheriff P.O. Box 76 Watervliet, NY 12189-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 10/24/200</p> <p>10/24/200</p> <p>\$125.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>F. Full Name, Mailing Address and Zip Code Watervliet Democratic Committee 1312 4th Avenue Watervliet, NY 12189-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 10/24/200</p> <p>10/24/200</p> <p>\$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Cohoes Democratic Committee P.O. Box 613 Cohoes, NY 12047-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 10/24/200</p> <p>10/24/200</p> <p>\$125.00</p>	<p>Amount of Each Receipt this Period \$125.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$1375.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)
McNulty for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Saratoga Co. Democratic Committee 267 Saratoga Ave Mechanicville, NY 12118-		10/20/200	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$200.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
North Greenbush Democratic Committee 18 Elward Rd. Troy, NY 12180-		10/25/200	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$200.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rensselaerville Democratic Social Club 117 Gifford Hollow Road Berne, NY 12023-		10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$250.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
McEneny for Assembly 147 Colonial Ave. Albany, NY 12208-1409		10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$125.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Friends of Warren McGreevy 6 Hemstreet Road Schaghticoke, NY 12154-		10/30/200	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$100.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rensselaer County Democratic Committee P.O. Box 988 Troy, NY 12180-		10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Committee to Elect Mark Pattison 3 Collins Avenue Troy, NY 12180-		10/29/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$125.00

SUBTOTAL of Receipts This Page (optional)	\$900.00
TOTAL 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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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Friends of Fowler Biddick 344 Livingston Ave., No. 2 Albany, NY 12206-		10/25/200	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$25.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Friends of Paul Tonko 137 Princeton Street Amsterdam, NY 12010-		10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$250.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Committee to Re-Elect Seth Walsh P.O. Box 206 Troy, NY 12181-		10/24/200	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$250.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	

SUBTOTAL of Receipts This Page (optional)	\$275.00
TOTAL This Period (last page this line number only)	\$3800.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of tax Data and Summary Page

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)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code Citizens For Responsible Government Employees of MS& Inc. PO Box 4078 Butte, MT 59701-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$125.00</p>	<p>Date (month, day, year) 10/28/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>B. Full Name, Mailing Address and Zip Code Professionals in Advertising PAC 1859 L Street, NW, Suite 700 Washington, DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 10/20/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Hocing Political Action Committee 1200 Wilson Blvd. Arlington, VA 22209-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/21/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code International Council of Shopping Centers PAC 1033 North Fairfax St., Ste. 404 Alexandria, VA 22314-1540</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 10/20/200</p>	<p>Amount of Each Receipt this Period \$2000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Preston, Gates, Ellis & Rouvelas, Meeds PAC 1735 New York Ave., NW, Ste. 500 Washington, DC 20006-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/22/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code RFOPAC PO Box 471 Akron, OH 44309-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/26/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and Zip Code Bell Atlantic Federal PAC 1717 Arch Street, 47S Philadelphia, PA 19103-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 11/02/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$5375.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code Communication Workers of America PAC Local # 1118 29 Fuller Road Albany, NY 12205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Hotel, Motel & Restaurant Employees' & Bartenders PAC 368 Broadway Saratoga Springs, NY 12866-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$125.00</p>	<p>Date (month, day, year) 10/28/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>C. Full Name, Mailing Address and Zip Code Williams & Jensen, P.C. PAC 1155 21st Street, NW, Suite 300 Washington, DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Association for the Advancement of Psychology, Inc. PAC (AAP/PLAN) PO Box 38129 Colorado Springs, CO 80937-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Anheuser-Busch PAC Republic Place 1776 I Street, Suite 300 Washington, DC 20006-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 11/02/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Asbestos Workers PAC 1776 Massachusetts Ave, NW, Ste. 301 Washington, DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 10/25/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Southwest Airlines Freedom Fund PO Box 34611 Dallas, TX 75235-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 10/25/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$3875.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Postal Workers Union AFL-CIO COPAlert 1300 L Street N.W. Washington, DC 20005-		10/20/200	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$2000.00	
B. Full Name, Mailing Address and Zip Code American Medical Political Action Comm. 1101 Vermont Avenue, NW Washington, DC 20005-		10/25/200	\$3000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$6000.00	
C. Full Name, Mailing Address and Zip Code Metropolitan Life Insurance Company Employees' Political Participation Fund R New York, NY 10010-3590		10/20/200	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$3000.00	
D. Full Name, Mailing Address and Zip Code Bricklayers & Allied Craftworkers Local Union No. 2 302 Centre Drive Albany, NY 12203-		10/24/200	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$750.00	
E. Full Name, Mailing Address and Zip Code American Society of Association Executives A-PAC 1575 I Street, NW Washington, DC 20005-		10/21/200	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1500.00	
F. Full Name, Mailing Address and Zip Code American Maritime Officers VBAF 650 4th Ave. Brooklyn, NY 11232-		10/22/200	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1500.00	
G. Full Name, Mailing Address and Zip Code American Dental Political Action Comm. 1311 - 14th Street, NW, Suite 1100 Washington, DC 20005-		10/22/200	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	

SUBTOTAL of Receipts This Page (optional)	\$7750.00
TOTAL 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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NAME OF COMMITTEE (in Full)
McNulty For Congress

<p>A. Full Name, Mailing Address and Zip Code AICPA Effective Legislative Comm. 1455 Pennsylvania Avenue, NW Washington, DC 20004-1081</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 10/25/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Air Line Pilots Association - PAC 1625 Massachusetts Ave. N.W. Washington, DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 10/20/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Sheet Metal Workers' International Association Political Action League 1750 New York Ave., N.W. Washington, DC 20006-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 11/02/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Daniel McGraw 100E Local 106 VPAF 1294 Central Avenue Albany, NY 12205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 10/24/200</p>	<p>Amount of Each Receipt this Period \$750.00</p>
<p>E. Full Name, Mailing Address and Zip Code Realtors Political Action Committee 430 N. Michigan Ave. Chicago, IL 60611-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$7500.00</p>	<p>Date (month, day, year) 10/26/200</p>	<p>Amount of Each Receipt this Period \$5000.00</p>
<p>F. Full Name, Mailing Address and Zip Code New York Mercantile Exchange 1 North End Ave. World Financial Ctr. New York, NY 10282-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 11/02/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Keycorp PAC 127 Public Square Cleveland, OH 44114-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$125.00</p>	<p>Date (month, day, year) 10/10/200</p>	<p>Amount of Each Receipt this Period \$125.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$9875.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A**ITEMIZED RECEIPTS**

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

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5	5
FOR LINE NUMBER	
11(c)	

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code Investment Management PAC of the Investment Company Institute 1401 K Street, NW Washington, DC 20005- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/25/200	\$1000.00
Aggregate Year-to-Date ->		\$2000.00	
B. Full Name, Mailing Address and Zip Code UAW V CAP 8000 E. Jefferson Detroit, MI 48214-3963 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/22/200	\$1000.00
Aggregate Year-to-Date ->		\$2000.00	
C. Full Name, Mailing Address and Zip Code UAW V CAP 8000 E. Jefferson Detroit, MI 48214-3963 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/26/200	\$1000.00
Aggregate Year-to-Date ->		\$3000.00	
D. Full Name, Mailing Address and Zip Code Federal Managers Association PAC 1641 Prince Street Alexandria, VA 22314- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/24/200	\$500.00
Aggregate Year-to-Date ->		\$500.00	
E. Full Name, Mailing Address and Zip Code , Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Aggregate Year-to-Date ->			
F. Full Name, Mailing Address and Zip Code , Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Aggregate Year-to-Date ->			
G. Full Name, Mailing Address and Zip Code , Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Aggregate Year-to-Date ->			

SUBTOTAL of Receipts This Page (optional)

\$3500.00

TOTAL This Period (last page this line number only)

\$30375.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the detailed Summary page

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code HSBC 148 George St. Green Island, NY 12183- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer <i>Bank Interest</i> Occupation Aggregate Year-to-Date ->	Date (month, day, year) 11/27/200	Amount of Each Receipt this Period \$2405.66
B. Full Name, Mailing Address and Zip Code HSBC 148 George St. Green Island, NY 12183- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer <i>Bank Adjustment</i> Occupation Aggregate Year-to-Date ->	Date (month, day, year) 11/21/200	Amount of Each Receipt this Period \$-10.00
C. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$2395.66
TOTAL This Period (last page this line number only)	\$2395.66

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the detailed summary page

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Express P.O. Box 297812 Fort Lauderdale, FL 33325-7812	Airfare/Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/14/200	\$1281.56
B. Full Name, Mailing Address and Zip Code National Democratic Club 30 Ivy St., S.E. Washington, DC 20003-	Purpose of Disbursement Club Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/30/200	Amount of Each Disbursement This Period \$77.27
C. Full Name, Mailing Address and Zip Code Verizon (formerly Bell Atlantic) PO Box 1100 Albany, NY 12250-0001	Purpose of Disbursement Telephone Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/17/200	Amount of Each Disbursement This Period \$48.87
D. Full Name, mailing Address and Zip Code Verizon (formerly Bell Atlantic) PO Box 1100 Albany, NY 12250-0001	Purpose of Disbursement Telephone Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/30/200	Amount of Each Disbursement This Period \$80.36
E. Full Name, Mailing Address and Zip Code Verizon (formerly Bell Atlantic) PO Box 1100 Albany, NY 12250-0001	Purpose of Disbursement Telephone Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/200	Amount of Each Disbursement This Period \$94.93
F. Full Name, Mailing Address and Zip Code Verizon (formerly Bell Atlantic) PO Box 1100 Albany, NY 12250-0001	Purpose of Disbursement Cellular Phone Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/30/200	Amount of Each Disbursement This Period \$48.38
G. Full Name, Mailing Address and Zip Code Felthousen's Florist & Greenhouse 250 Columbia St. Cohoes, NY 12047-	Purpose of Disbursement Sympathy Flowers Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/17/200	Amount of Each Disbursement This Period \$189.00

SUBTOTAL of Disbursements This Page (optional)	\$1820.37
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use appropriate schedule(s) for each category of the Detailed Murray Page

PAGE 2 OF 4
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steuben Athletic Club 1 Steuben Place Albany, NY 12207-	10-17-00 Campaign Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/200	\$124.97
Time Warner Cable 130 Washington Ave. Ext. Albany, NY 12203-5336	Internet Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/17/200	\$83.90
Time Warner Cable 130 Washington Ave. Ext. Albany, NY 12203-5336	Internet Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/200	\$125.85
Crowne Plaza Albany State and Lodge Streets Albany, NY 12207-	10-24-00 Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/200	\$4551.24
Crowne Plaza Albany State and Lodge Streets Albany, NY 12207-	Deposit 10-24-00 Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/200	\$1400.00
Peony Restaurant c/o Chungchin Chen 4 Flicker Drive Latham, NY 12110-	10/8/00 Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/200	\$460.00
Viny's Printing 1925 Curry Road Schenectady, NY 12303-	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/200	\$250.00

SUBTOTAL of Disbursements This Page (optional)	\$6995.96
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of line itemized Summary Page

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster 400 Broadway Troy, NY 12180-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/200	\$165.00
Postmaster 400 Broadway Troy, NY 12180-9998	Express Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/17/200	\$25.00
Postmaster 400 Broadway Troy, NY 12180-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/200	\$825.00
Postmaster 400 Broadway Troy, NY 12180-9998	Stamps Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/17/200	\$66.00
XBNA America P.O. Box 15019 Wilmington, DE 19886-5019	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/27/200	\$206.92
Mooradians 700 Central Ave. Albany, NY 12206-	Headquarter Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/200	\$400.00
Polish American CLUB AUXILIARY 330 Commerce Ave Albany, NY 12206-	11-6-00 Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/17/200	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$2667.92
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of line itemized Primary Page

PAGE 4 OF 4

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Albany Polish American Citizens' Club 110 Commerce Ave. Albany, NY 12206-	11-6-00 Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/17/200	\$550.00
B. Full Name, Mailing Address and Zip Code Preferred Mutual Insurance Company 1 Preferred Way New Berlin, NY 13411-1896	Purpose of Disbursement Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/17/200	\$311.70
C. Full Name, Mailing Address and Zip Code Alchar Printing 602 Pawling Ave. Troy, NY 12180-	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/200	\$246.24
D. Full Name, Mailing Address and Zip Code Alchar Printing 602 Pawling Ave. Troy, NY 12180-	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/17/200	\$312.12
E. Full Name, Mailing Address and Zip Code Alchar Printing 602 Pawling Ave. Troy, NY 12180-	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/200	\$130.68
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$1550.74
TOTAL This Period (last page this line number only)	\$13054.99

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Unity House of Troy 401 Monroe Street Troy, NY 12180-	11-30-00 Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/200	\$100.00
B. Full Name, Mailing Address and Zip Code College of the Holy Cross One College Street Worcester, MA 01610-2395	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/17/200	\$250.00
C. Full Name, Mailing Address and Zip Code Hilltowns Democrats 21 Rice Road Rensselaerville, NY 12147-	11-4-00 Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/200	\$100.00
D. Full Name, Mailing Address and Zip Code Elect Trachlerberg Committee PO Box 986 Schenectady, NY 12301-0986	10/26/00 Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/200	\$250.00
E. Full Name, Mailing Address and Zip Code Steve Israel for Congress 1966-5 Deer Park Ave Deer Park, NY 11729-	Contribution, House, NY, D-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/200	\$1000.00
F. Full Name, Mailing Address and Zip Code Steve Israel for Congress 1966-5 Deer Park Ave Deer Park, NY 11729-	Contribution, House, NY, D-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/200	\$1000.00
G. Full Name, Mailing Address and Zip Code Paul Perry for Congress 1101 Professional Blvd Evansville, IN 47714-	Contribution, House, IN, D-08 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/200	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$3700.00
TOTAL 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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NAME OF COMMITTEE (In Full)
McNulty For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lane Evans Committee 1800 3rd Ave., #308 Rock Island, IL 61201-	Contribution, House, IL, D-17 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/200	\$1000.00
B. Full Name, Mailing Address and Zip Code Earl Pomeroy for Congress PO Box 740 Bismarck, ND 58502-	Contribution, House, ND, D-01 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/200	\$1000.00
C. Full Name, Mailing Address and Zip Code Committee to Re-elect Sam Gejdenson PO Box 1818 Borrah, CT 06834-	Contribution, House, CT, D-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/200	\$1000.00
D. Full Name, Mailing Address and Zip Code Senior Services of Albany Foundation 25 Delaware Ave Albany, NY 12210-	11-16-00 Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/04/200	\$350.00
E. Full Name, Mailing Address and Zip Code Rensselaer County Independence Committee PO Box 649 Wynantskill, NY 12198-	11-20-00 Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/17/200	\$300.00
F. Full Name, Mailing Address and Zip Code Friends of Mike Breslin 5 Flat Drive Delmar, NY 12054-	11-30-00 Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/27/200	\$250.00
G. Full Name, Mailing Address and Zip Code Friends of Senator Neil Breslin 15 Pinedale Ave. Delmar, NY 12054-	10-26-00 Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/200	\$500.00

SUBTOTAL of Disbursements This Page (optional)	\$4400.00
TOTAL 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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NAME OF COMMITTEE (In Full)
McNully For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Albany County Democratic Committee 22 Colvin Ave. Albany, NY 12206-	Housekeeping Contribution Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/200	\$2000.00
Schenectady County Democratic Committee 46 Warwick Way Niskayuna, NY 12309-	11-4-00 Event Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/200	\$150.00
McEneny for Assembly 147 Colonial Ave. Albany, NY 12208-1409	10-23-00 Event Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/200	\$400.00
Friends of Paul Tonko 137 Princeton Street Amsterdam, NY 12010-	10-22-00 Event Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/200	\$60.00

SUBTOTAL of Disbursements This Page (optional)	\$1620.00
TOTAL This Period (last page this line number only)	\$9710.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
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