

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Chris Cox for Congress

ADDRESS (number and street) 180 EAST MAIN STREET

Check if different than previously reported. (ACC)

SMITHTOWN NY 11787

2. **FEC IDENTIFICATION NUMBER** C00474395

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

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NY 01

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

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

Convention (12C) Special (12S)

Election on [] [] [] in the State of []

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

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

Election on [] [] [] in the State of []

5. Covering Period 01 01 2010 through 03 31 2010

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 Mr. William Rothaar

Signature of Treasurer Electronically Filed by Mr. William Rothaar Date 07 30 2010

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Chris Cox for Congress

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	239318.00	239318.00
(b) Total Contribution Refunds (from Line 20(d)).....	100.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	239218.00	239218.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	124712.28	124712.28
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	124712.28	124712.28
8. Cash on Hand at Close of Reporting Period (from Line 27).....	614505.72	
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).....	500000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Chris Cox for Congress

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	207552.00	207552.00
(i) Itemized (use Schedule A).....	15766.00	15766.00
(ii) Unitemized.....	223318.00	223318.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	3000.00	3000.00
(c) Other Political Committees (such as PACS).....	13000.00	13000.00
(d) The Candidate.....	239318.00	239318.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	500000.00	500000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	500000.00	500000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	739318.00	739318.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	124712.28	124712.28
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 Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	100.00	100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	100.00	100.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	124812.28	124812.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	739318.00
25. SUBTOTAL (add Line 23 and Line 24).....	739318.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	124812.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	614505.72

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

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

FOR LINE NUMBER: PAGE 5 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. VINGENT ACHILARRE

Mailing Address 157 WOODLAND AVENUE

City State Zip Code
CONVENT NJ 07960-6534

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
APS HEALTHCARE, INC EXECUTIVE

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.395

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK G. ACKERMANN

Mailing Address 572 BRICKYARD RD.

City State Zip Code
FREEHOLD NJ 07728-8417

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
THE LIGHTHOUSE INTERNATIO- PRESIDENT/CEO
NAL

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.434

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRED AMERI

Mailing Address 33 MONACO

City State Zip Code
NEWPORT BEACH CA 92660-6820

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RBF CONSULTING CONSULTANT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11.512

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 6 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
AMB. GEORGE ARGYROS

Mailing Address 949 S. COAST DR.
STE 600

City COSTA MESA State CA Zip Code 92626-7734

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

Name of Employer ARNEL & AFFLIICATIONS Occupation CHAIRMAND & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.468
 Amount of Each Receipt this Period: 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ISABELLA ARJONA

Mailing Address 19955 NE 38TH STREET
APT. 806

City AVENTURA State FL Zip Code 33180-3429

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.396
 Amount of Each Receipt this Period: 2400.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FARHAD AZIMA

Mailing Address 5921 WARD PARKWAY

City ST. LOUIS State MO Zip Code 64113-1349

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

Name of Employer AVIATION LEASING GROUP Occupation CHAIRMAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.397
 Amount of Each Receipt this Period: 2400.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5800.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MRS. VICTORIA BAILEY		Date of Receipt
	Mailing Address 105 DANVERS STREET		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN FRANCISCO	CA	94114-2328
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.530
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="300.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MRS. DONNA BARKSDALE		Date of Receipt
	Mailing Address 800 WOODLANDS PKWY, STE 118		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RIDGELAND	MS	39157-5200
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.470
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="2400.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. JAMES BARKSDALE		Date of Receipt
	Mailing Address 800 WOODLANDS PKWY, STE 118		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	RIDGELAND	MS	39157-5200
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.469
Name of Employer BARKSDALE MANAGEMENT		Occupation EXECUTIVE	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="2400.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5100.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 87
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) JOHN H. BARR	Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2010
	Mailing Address 5150 E LAPALMA AVE #112	Transaction ID: SA11.318
	City ANAHEIM State CA Zip Code 92807-2085	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. PETER BEEHLER	Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2010
	Mailing Address 1027 S. PARK AVE	Transaction ID: SA11.471
	City NORRISTOWN State PA Zip Code 19403-2066	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MR. DON BENDETTI	Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2010
	Mailing Address 523 EMERAL BAY	Transaction ID: SA11.615
	City LAGUNA BEACH State CA Zip Code 02651	Amount of Each Receipt this Period 1750.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INDUSTRIAL DEVELOPMENT Occupation SELF EMPLOYED Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1750.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) DOROTHY L. BENDETTI	Date of Receipt MM / DD / YYYY 03 / 26 / 2010
	Mailing Address 523 EMERALD BAY	Transaction ID: SA11.326
	City State Zip Code LAGUNA BEACH CA 92651-1256	Amount of Each Receipt this Period 1750.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF EMPLOYED Occupation HOMEMAKER Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1750.00	

B.	Full Name (Last, First, Middle Initial) MRS. MICHELLE BERGMAN	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 334 WHITE OAK RIDGE RD	Transaction ID: SA11.398
	City State Zip Code SHORT HILLS NJ 07078-1158	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer DUANE REED Occupation ATTORNEY Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MARLENE BERNE	Date of Receipt MM / DD / YYYY 03 / 30 / 2010
	Mailing Address 235 EAST 73RD STREET APT. 4A	Transaction ID: SA11.341
	City State Zip Code NEW YORK NY 10021-3655	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer GERSON GROUP Occupation MANAGING DIRECTOR Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional)	▶	4650.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MARLENE BERNE	Date of Receipt MM / DD / YYYY 03 / 30 / 2010
	Mailing Address 235 EAST 73RD STREET APT. 4A	Transaction ID: SA11.617
	City State Zip Code NEW YORK NY 10021-3655	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation GERSON GROUP MANAGING DIRECTOR	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

B.	Full Name (Last, First, Middle Initial) MR. ERIK J. BLOMQUIST	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 5 CAMBRIA ROAD E.	Transaction ID: SA11.437
	City State Zip Code PALM BEACH GARDENS FL 33418-7028	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation FLORIDA CRYSTALS CORP MANAGER	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MR. NICHOLAS J. BOURAS	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 112 BEEKMAN ROAD	Transaction ID: SA11.380
	City State Zip Code SUMMIT NJ 07901-1723	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BOURAS PROPERTIES CHAIRMAN	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	5800.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 11 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
JONATHON BUSH

Mailing Address 80 ELM STREET

City State Zip Code
NEW HAVEN CT 06510-2011

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: SA11.472

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

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

B. Full Name (Last, First, Middle Initial)
PHILIP A. BYLER

Mailing Address 11 BROADVIEW DRIVE

City State Zip Code
HUNTINGTON NY 11743-4405

Date of Receipt
MM / DD / YYYY
03 / 25 / 2010

Transaction ID: SA11.320

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

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Name of Employer Occupation
ATTORNEY NESENOFF & MILTENBERG

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

C. Full Name (Last, First, Middle Initial)
FRANCIS J. CALCAGNO

Mailing Address 33 JEFFREY CT

City State Zip Code
BASKING RIDGE NJ 07920-1967

Date of Receipt
MM / DD / YYYY
03 / 30 / 2010

Transaction ID: SA11.484

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

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. J. CHRISTOPHER CALLAGHAN

Mailing Address 9 SIXTH AVENUE

City WATERFORD State NY Zip Code 12188-2305

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2010
Transaction ID: SA11.485
Amount of Each Receipt this Period 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JOYCE D CAMPBELL

Mailing Address 125 BOARD ST.

City NEW YORK State NY Zip Code 10013-4368

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2010
Transaction ID: SA11.486
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN C. CANONI

Mailing Address 188 BRONXVILLE ROAD

City BRONXVILLE State NY Zip Code 10708-5925

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

Name of Employer KASOWTIZ, BENSON, TORRES, & FRIEDMAN L Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 18 / 2010
Transaction ID: SA11.306
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 87

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial)
MR. GASTON CANTENS

Mailing Address 11750 SW 29TH STREET

City State Zip Code
MIAMI FL 33175-2413

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
FLORIDA CRYSTALS CORP MANAGER

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: SA11.438

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOHN K. CASTLE

Mailing Address 1095 N. OCEAN BLVD.

City State Zip Code
PALM BEACH FL 33480-3230

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
CASTLE HARLAN CHAIRMAN & CEO

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 25 / 2010

Transaction ID: SA11.321

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN K. CASTLE

Mailing Address 1095 N. OCEAN BLVD.

City State Zip Code
PALM BEACH FL 33480-3230

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
CASTLE HARLAN CHAIRMAN & CEO

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 25 / 2010

Transaction ID: SA11.616

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 5800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MS. ANDRA J. CATSIMATIDIS

Mailing Address 817TH FIFTH AVENUE

City State Zip Code
NEW YORK NY 10065

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

Name of Employer Occupation
STUDENT STUDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.381

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

4800.00

B. Full Name (Last, First, Middle Initial)
MS. ANDRA J. CATSIMATIDIS

Mailing Address 817TH FIFTH AVENUE

City State Zip Code
NEW YORK NY 10065

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

Name of Employer Occupation
STUDENT STUDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.599

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

4800.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN A. CATSIMATIDIS, JR.

Mailing Address 817TH FIFTH AVENUE

City State Zip Code
NEW YORK NY 10065

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

Name of Employer Occupation
STUDENT STUDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.382

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

4800.00

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN A. CATSIMATIDIS, JR.
Mailing Address 817TH FIFTH AVENUE
City NEW YORK State NY Zip Code 10065
FEC ID number of contributing federal political committee. **C**
Name of Employer STUDENT Occupation STUDENT
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00
Date of Receipt 03 / 29 / 2010
Transaction ID: SA11.600
Amount of Each Receipt this Period 2400.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JO ELLEN CHATHAM
Mailing Address 4 LUCERNE
City NEWPORT BEACH State CA Zip Code 92660-6819
FEC ID number of contributing federal political committee. **C**
Name of Employer SOUTHERN CALIFORNIA EDISON Occupation DIRECTOR PUBLIC AFFAIRS
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2010
Transaction ID: SA11.513
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SALLY CONNELLY
Mailing Address 28476 ACAPULCO
City MISSION VIEJO State CA Zip Code 92692-4912
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2010
Transaction ID: SA11.514
Amount of Each Receipt this Period 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2900.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MR. HOWARD COX	Date of Receipt MM / DD / YYYY 01 / 20 / 2010
	Mailing Address 880 WINTER ST. SUITE 300	Transaction ID: SA11.386
	City State Zip Code WALTHAM MA 02451-1464	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation GREYLOCK MANAGEMENT VENTURE CAPITALIST	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

B.	Full Name (Last, First, Middle Initial) MR. HOWARD COX	Date of Receipt MM / DD / YYYY 01 / 20 / 2010
	Mailing Address 880 WINTER ST. SUITE 300	Transaction ID: SA11.594
	City State Zip Code WALTHAM MA 02451-1464	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation GREYLOCK MANAGEMENT VENTURE CAPITALIST	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

C.	Full Name (Last, First, Middle Initial) MRS. MAZIE COX	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address P.O. BOX 1106	Transaction ID: SA11.588
	City State Zip Code ROCKPORT ME 04856-1106	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF EMPLOYED DESIGNER	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional)	7200.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 17 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MRS. MAZIE COX
Mailing Address P.O. BOX 1106
City State Zip Code
ROCKPORT ME 04856-1106
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation DESIGNER
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11.605
Amount of Each Receipt this Period: 2400.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. TRICIA NIXON COX
Mailing Address 10 EAST 70TH STREET
City State Zip Code
NEW YORK NY 10021-4963
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.473
Amount of Each Receipt this Period: 2400.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. TRICIA NIXON COX
Mailing Address 10 EAST 70TH STREET
City State Zip Code
NEW YORK NY 10021-4963
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.601
Amount of Each Receipt this Period: 2400.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 7200.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 18 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
JANE CROTTY

Mailing Address 3 STUYVESTANT OVAL

City State Zip Code
NEW YORK NY 10009-2122

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

Name of Employer Occupation
GEORGE ARZT COMMUNICATIONS LOBBYIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 06 / 2010

Transaction ID: SA11.391

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SANDRA L. CUYLER

Mailing Address 8171 BAY COLONY DR.
#1902

City State Zip Code
NAPLES FL 34108-7567

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.383

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES B. DAVIS

Mailing Address 710 NORTH SIERRA DRIVE

City State Zip Code
BEVERLY HILLS CA 90210-3524

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

Name of Employer Occupation
PMIC PUBLISHER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11.37

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MR. THOMAS DAVIS		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 2213 ARYNESS DR.		Transaction ID: SA11.586		
	City VIENNA	State VA	Zip Code 22181-3047	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer DELOITTE CONSULTING	Occupation ATTORNEY	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) MR. REYNOLDS DUPONT JR.		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address P.O. BOX J		Transaction ID: SA11.574		
	City FISHERS ISLAND	State NY	Zip Code 06390-0609	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer PIRATES CAVE MARINE INC.	Occupation PRESIDENT	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) CATHLEEN EGAN		Date of Receipt MM / DD / YYYY 03 / 30 / 2010		
	Mailing Address 41 BILTMORE AVENUE		Transaction ID: SA11.488		
	City RYE	State NY	Zip Code 10580-1839	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		CONTRIBUTION		
	Name of Employer HOMEMAKER	Occupation HOMEMAKER	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
THOMAS EGAN

Mailing Address 41 BILTMORE AVENUE

City State Zip Code
RYE NY 10580-1839

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

Name of Employer Occupation
CITIGROUP BANKER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2010

Transaction ID: SA11.487

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ANNE EISENHOWER

Mailing Address 775 PARK AVENUE
APT. 8D

City State Zip Code
NEW YORK NY 10021-4253

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

Name of Employer Occupation
SELF EMPLOYED INTERIOR DESIGNER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.436

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JULIE NIXON EISENHOWER

Mailing Address FOXHALL LANE

City State Zip Code
BERWYN PA 19312

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

Name of Employer Occupation
SELF EMPLOYED WRITER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.475

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) KRIS F. ELFTMANN	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 98 OLD COURAGE DRIVE	Transaction ID: SA11.339
	City State Zip Code NEWPORT BEACH CA 92660	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation NOELLE PRESIDENT	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) MR. JOSE F. FANJUL JR	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 201 GARDEN ROAD	Transaction ID: SA11.439
	City State Zip Code PALM BEACH FL 33480-3219	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation FLORIDA CRYSTALS CORP EXECUTIVE	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) MR. SEAN FIELER	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 40 HASLET AVENUE	Transaction ID: SA11.509
	City State Zip Code PRINCETON NJ 08540-4914	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation EQUINOX INVESTMENT PARTNE- RS PARTNER	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 22 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL FINLEY

Mailing Address 181 LONG HILL ROAD

City State Zip Code
LITTLE FALLS NJ 07424-2050

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

Name of Employer Occupation
ROPEMAKER CAPITAL LLC FINANCE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2010

Transaction ID: SA11.325

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KRISTEN FISHER

Mailing Address 1495 BROADWAY
C/O ANCHIN BLOCK ANCHIN

City State Zip Code
NEW YORK NY 10036-4023

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

Name of Employer Occupation
NONE NONE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.329

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KRISTEN FISHER

Mailing Address 1495 BROADWAY
C/O ANCHIN BLOCK ANCHIN

City State Zip Code
NEW YORK NY 10036-4023

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

Name of Employer Occupation
NONE NONE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.329B

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) JOHN FITZGIBBONS	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 2 WELLINGTON CIRCLE	Transaction ID: SA11.343
	City State Zip Code BRONXVILLE NY 10708-3011	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation J FITZGIBBONS LLC PARTNER Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	4800.00

B.	Full Name (Last, First, Middle Initial) JOHN FITZGIBBONS	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 2 WELLINGTON CIRCLE	Transaction ID: SA11.343B
	City State Zip Code BRONXVILLE NY 10708-3011	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation J FITZGIBBONS LLC PARTNER Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	4800.00

C.	Full Name (Last, First, Middle Initial) MR. PETER FLANIGAN	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 299 PARK AVENUE 35TH FLOOR	Transaction ID: SA11.602
	City State Zip Code NEW YORK NY 10171-0002	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation UBS SENIOR ADVISOR Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00

SUBTOTAL of Receipts This Page (optional)	5800.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 24 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. PETER FLANIGAN

Mailing Address 299 PARK AVENUE
35TH FLOOR

City State Zip Code
NEW YORK NY 10117

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

Name of Employer Occupation
UBS SENIOR ADVISOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11.611

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BURT P. FLICKINGER III

Mailing Address 160 RIVERSIDE DRIVE
APT. 10A

City State Zip Code
NEW YORK NY 10024-2107

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	0

Transaction ID: SA11.384

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CATHERINE FLICKINGER

Mailing Address 160 RIVERSIDE DRIVE
APT. 10A

City State Zip Code
NEW YORK NY 10024

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

Name of Employer Occupation
HACHETTE FILIPACCHI MEDIA ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11.612

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **4400.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MR. BARRY FRIEDBERG	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 134 E. 71ST STREET	Transaction ID: SA11.534
	City State Zip Code NEW YORK NY 10021-5011	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation FRIEDBERG MILSTEIN INVESTMENTS	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR. THOMAS A. FUENTUS	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 22112 WINDWARD WAY	Transaction ID: SA11.515
	City State Zip Code LAKE FOREST CA 92630-3354	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR. JOHN FUGAZY	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 239 SUNNY RIDGE RD.	Transaction ID: SA11.590
	City State Zip Code HARRISON NY 10528-1521	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation JCF INDUSTRIES LTD PRESIDENT	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 26 / 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial)
MR. ROY FUGAZY

Mailing Address 1270 AVENUE OF AMERICAS

City State Zip Code
NEW YORK NY 10020-1700

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

Name of Employer Occupation
FUGAZY INTERNATIONAL PRESIDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.476

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. WALTER J. GANZI, JR.

Mailing Address 1739 RHODE ISLAND AVENUE NW
SUITE 900

City State Zip Code
WASHINGTON DC 20036-3001

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

Name of Employer Occupation
PALM RESTARUANT GROUP OWNER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.591

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LOIE GRACE GAUNT

Mailing Address 12122 ORA STREET

City State Zip Code
GARDEN GROVE CA 92840-3422

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11.516

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2900.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. LAURANCE W. GAY

Mailing Address 40 EAST 63RD STREET

City State Zip Code
NEW YORK NY 10065-8035

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

Name of Employer Occupation
BUSINESS STRATEGY & INSIG- HT PRESIDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.592

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER M. GIBLIN, SR.

Mailing Address 1304 CHANCEL PLACE

City State Zip Code
ALEXANDRIA VA 22314-4707

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

Name of Employer Occupation
OGILVY GOVERNMENT RELATIO- NS GOVERNMENT RELATIONS

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2010

Transaction ID: SA11.278

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT GIUFFRA, JR.

Mailing Address 125 BOARD ST.

City State Zip Code
NEW YORK NY 10013-4368

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

Name of Employer Occupation
SULLIVAN & CROMWELL ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2010

Transaction ID: SA11.489

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MRS. LINDSEY GOLDWASSER PLUTZIK

Mailing Address 312 WEST 102ND STREET

City State Zip Code
NEW YORK NY 10025-4931

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

Name of Employer Occupation
IRVING PLACE CAPITAL MANAGING DIRECTOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11.508

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARBARA GRACE

Mailing Address 470 WEST STREET

City State Zip Code
HARRISON NY 10528-2510

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

Name of Employer Occupation
SELF EMPLOYED GENERAL CONTRACTOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	0

Transaction ID: SA11.490

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERIC GRIBETZ

Mailing Address 920 PARK AVENUE
APT. 16A

City State Zip Code
NEW YORK NY 10028-0208

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

Name of Employer Occupation
PEGASUS CAPITAL ADVISORS, LP PARTNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	0

Transaction ID: SA11.593

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MR. KAMRAN HAKIM	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 425 E. 61ST STREET	Transaction ID: SA11.379
	City State Zip Code NEW YORK NY 10065-8722	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF EMPLOYED Occupation REAL ESTATE Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM HANLEY JR.	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 250 JUNGLE ROAD	Transaction ID: SA11.385
	City State Zip Code PALM BEACH FL 33480-4812	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer LEXINGTON MANAGEMEN Occupation PRIVATE INVESTOR Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) MR. KENNETH H HANNAN JR.	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 60 EAST END AVENUE APT. 30A	Transaction ID: SA11.544
	City State Zip Code NEW YORK NY 10028-7946	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer COLONIAL NAVIGATION, CO Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	5300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MRS. CHARLENE HAROCHE

Mailing Address 1233 RIMMON ROCK ROAD

City State Zip Code
STAMFORD CT 06903-1107

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.399

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GILBERT HAROCHE

Mailing Address 1233 RIMMON ROCK ROAD

City State Zip Code
STAMFORD CT 06903-1107

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
LIBERTY TRAVEL PRESIDENT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.589

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EMIL W. HENRY, JR.

Mailing Address 161 CANTITOE ST

City State Zip Code
KATONAH NY 10536-3801

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt M M / D D / Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11.364

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. EMIL W. HENRY, JR.
Mailing Address 161 CANTITOE ST
City KATONAH State NY Zip Code 10536-3801
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INVESTOR
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.400
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GAVIN HERBERT
Mailing Address 4100 CALLE ISABELLA
City SAN CLEMENTE State CA Zip Code 92672-4568
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt: 03 / 26 / 2010
Transaction ID: SA11.322
Amount of Each Receipt this Period: 2400.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRUCE HERSCHEISOHN
Mailing Address 7135 HOLLYWOOD BLVD
City LOS ANGELES State CA Zip Code 90046-3212
FEC ID number of contributing federal political committee. **C**
Name of Employer PEPPERDINE UNIVERSITY Occupation TEACHER
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1002.00
Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11.517
Amount of Each Receipt this Period: 1002.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 3902.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 32 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MRS. HEATHER HIGGINS

Mailing Address 35-37 NORTH MOORE STREET
APT. 2A/B

City State Zip Code
NEW YORK NY 10013

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.401

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT HOPKINS

Mailing Address P.O. BOX 7006

City State Zip Code
NEWPORT BEACH CA 92658-7006

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

Name of Employer SELF EMPLOYED
Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11.518

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
J.C. HUIZENGA

Mailing Address 3755 36TH STREET
STE 100

City State Zip Code
GRAND RAPIDS MI 49512-3143

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2010

Transaction ID: SA11.491

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 33 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MRS. DENICE F. JOHNS

Mailing Address 258 SAINT NICHOLAS AVE

City State Zip Code
NEW YORK NY 10027-5351

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: SA11.402

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELAINE JOYCE

Mailing Address C/O GELLER FAMILY OFFICE SERVICES
800 THIRD AVENUE

City State Zip Code
NEW YORK NY 10022-7649

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2010

Transaction ID: SA11.535

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH KABLER

Mailing Address 435 E. 52ND STREET
#4F

City State Zip Code
NEW YORK NY 10022-6445

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

Name of Employer SELF EMPLOYED
Occupation INVESTOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: SA11.403

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. PETER KAKOYIANNIS

Mailing Address 1413 SILO ROAD

City YARDLEY State PA Zip Code 19067-4240

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

Name of Employer EISEMAN & LEVINE, P.A. Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.404
 Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NICHOLAS C. KATSORIS

Mailing Address 4 HOWELL PLACE

City EASTCHESTER State NY Zip Code 10709-3614

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.406
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH KHACHIGIAN

Mailing Address 300 SOUTH EL CAMINO REAL SUITE 203

City SAM CLEMENTE State CA Zip Code 92672-4070

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

Name of Employer BROWNSTEIN, HYATT, FARBER, SCHRECK Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11.520
 Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) BOBBIE KILBERG	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 6703 WEMBERLY WAY	Transaction ID: SA11.477
	City State Zip Code MCLEAN VA 22101-1529	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer NORTHERN VIRGINIA TECHNOLOGY Occupation CEO Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) MS. ALEXANDRA KLEIN	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 499 PARK AVENUE 27TH FLOOR	Transaction ID: SA11.479
	City State Zip Code NEW YORK NY 10022-1240	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) MS. ALEXANDRA KLEIN	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 499 PARK AVENUE 27TH FLOOR	Transaction ID: SA11.604
	City State Zip Code NEW YORK NY 10022-1240	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 36 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial)
MS. MARIAN KLEIN

Mailing Address 499 PARK AVENUE
27TH FLOOR

City State Zip Code
NEW YORK NY 10022-1240

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.478

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. MARIAN KLEIN

Mailing Address 499 PARK AVENUE
27TH FLOOR

City State Zip Code
NEW YORK NY 10022-1240

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.603

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DAVID M KNOTT

Mailing Address 232 CLEFT ROAD

City State Zip Code
MILL NECK NY 11765-1001

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

Name of Employer KNOTT PARTNERS
Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2010

Transaction ID: SA11.507

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **4900.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) KATHERINE COMMANDER KNOTT		Date of Receipt
	Mailing Address 232 CLEFT ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2010
	City	State	Zip Code
	MILL NECK	NY	11765-1001
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.493
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		1000.00	
Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Election Cycle-to-Date ▼		1000.00	

B.	Full Name (Last, First, Middle Initial) VIRGINIA KNOTT		Date of Receipt
	Mailing Address 232 CLEFT ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2010
	City	State	Zip Code
	MILL NECK	NY	11765-1001
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.506
Name of Employer HOMEMAKER		Amount of Each Receipt this Period	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2400.00	
Occupation HOMEMAKER		CONTRIBUTION	
Election Cycle-to-Date ▼		2400.00	

C.	Full Name (Last, First, Middle Initial) VIRGINIA MABON KNOTT		Date of Receipt
	Mailing Address 232 CLEFT ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2010
	City	State	Zip Code
	MILL NECK	NY	11765-1001
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.492
Name of Employer HOMEMAKER		Amount of Each Receipt this Period	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		1000.00	
Occupation HOMEMAKER		CONTRIBUTION	
Election Cycle-to-Date ▼		1000.00	

SUBTOTAL of Receipts This Page (optional)	4400.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 38 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. STEVEN KORNBLATT

Mailing Address 1645 A JERICHO TPKE

City State Zip Code
NEW HYDE PARK NY 11040-4714

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

Transaction ID: SA11.407

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CRISTYNE LATEGANO

Mailing Address 401 E 74TH STREET
APT. 7F

City State Zip Code
NEW YORK NY 10021-3927

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

Transaction ID: SA11.408

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER LAU

Mailing Address 40 PARK AVENUE
APT. 19B

City State Zip Code
NEW YORK NY 10016-3460

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

Transaction ID: SA11.480

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 39 / 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial)

JOHN LEBOUTILLIER

Mailing Address P.O. BOX 230

City

OLD WESTBURY

State

NY

Zip Code

11568-0230

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF

Occupation
AUTHOR

Receipt For:

2010

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.331

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. FRANCINE LEFRAK

Mailing Address 755 PARK AVENUE

City

NEW YORK

State

NY

Zip Code

10021-4255

FEC ID number of contributing federal political committee.

C

Name of Employer
LEFRAK PRODUCTIONS

Occupation
PRESIDENT

Receipt For:

2010

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.409

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

HON. JOHN LEHMAN

Mailing Address 450 PARK AVENUE

City

NEW YORK

State

NY

Zip Code

10022-2605

FEC ID number of contributing federal political committee.

C

Name of Employer
JF LEHMAN & CO.

Occupation
INVESTOR

Receipt For:

2010

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.410

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MS. DEBRA LEIBLE

Mailing Address 9 W. 64TH STREET
APT. 6F

City State Zip Code
NEW YORK NY 10023-6749

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.411

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE LENCE

Mailing Address 14TH HEMLOCK DRIVE

City State Zip Code
SLEEPY HOLLOW NY 10591

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

Name of Employer NICHOLAS & LENCE COMMUNICATIONS
Occupation PRESIDENT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.412

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOE S. LEVER

Mailing Address 2 BROADMOOR RD

City State Zip Code
SCARSDALE NY 10583-7604

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

Name of Employer KURZMAN & EISENBERG
Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.413

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

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

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

FOR LINE NUMBER: PAGE 41 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial)
GARY LEVINE

Mailing Address 6808 HOLLISTON CIRCLE

City State Zip Code
FAYETTEVILLE NY 13066-1700

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

Name of Employer Occupation
ATTORNEY GREEN & SEITTER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 05 / 2010

Transaction ID: SA11.21

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. ANTHONY J. LIMBERAKIS

Mailing Address 636 CROSSWICKS ROAD

City State Zip Code
RYDAL PA 19046-3002

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

Name of Employer Occupation
BUSTLETON RADIOLOGY PHYSICIAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.414

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LISA LINDEN

Mailing Address 670 WEST END AVENUE
AVE 15B

City State Zip Code
NEW YORK NY 10025-7313

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

Name of Employer Occupation
LINDEN ALSCHULEN PUBLIC RELATIONS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.415

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MR. DAVID S. MACK	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 2115 LINWOOD AVENUE	Transaction ID: SA11.393
	City State Zip Code FORT LEE NY 07024-5020	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: MACK MANAGEMENT & CONST. Occupation: PARTNER Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00

B.	Full Name (Last, First, Middle Initial) MRS. SONDA MACK	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 2115 LINWOOD AVENUE	Transaction ID: SA11.394
	City State Zip Code FORT LEE NY 07024-5020	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: INFORMATION REQUESTED PER BEST EFFORTS Occupation: INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00

C.	Full Name (Last, First, Middle Initial) MR. THOMAS MALCOLM	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1515 BAYADERE TERRACE	Transaction ID: SA11.522
	City State Zip Code CORONA DEL MAR CA 92625-1802	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: JONES DAY Occupation: ATTORNEY Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	5800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 87
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MRS. CHERYL MCKISSACK	Date of Receipt MM / DD / YYYY 01 / 20 / 2010
	Mailing Address 118 COX AVENUE	Transaction ID: SA11.387
	City ARMONK State NY Zip Code 10504-1913	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer MCKISSACK & MCKISSACK Occupation CONSTRUCTION Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00	

B.	Full Name (Last, First, Middle Initial) MRS. CHERYL MCKISSACK	Date of Receipt MM / DD / YYYY 01 / 20 / 2010
	Mailing Address 118 COX AVENUE	Transaction ID: SA11.595
	City ARMONK State NY Zip Code 10504-1913	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer MCKISSACK & MCKISSACK Occupation CONSTRUCTION Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00	

C.	Full Name (Last, First, Middle Initial) NOAH MCMAHON	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address 9140 IRVINE CENTER DRIVE	Transaction ID: SA11.22
	City IRVINE State CA Zip Code 92618-4659	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer PRESIDENT Occupation ANONYMOUS LLC Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	5050.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 44 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MRS. JENNIFER T. MERMEL

Mailing Address 300 E. 75TH STREET

City State Zip Code
NEW YORK NY 10021-3375

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

Name of Employer Occupation
MERMEL & MCLAIN REAL ESTATE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
01 / 20 / 2010

Transaction ID: SA11.389

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JENNIFER T. MERMEL

Mailing Address 300 E. 75TH STREET

City State Zip Code
NEW YORK NY 10021-3375

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

Name of Employer Occupation
MERMEL & MCLAIN REAL ESTATE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
01 / 20 / 2010

Transaction ID: SA11.597

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MYERS MERMEL

Mailing Address 300 E. 75TH STREET

City State Zip Code
NEW YORK NY 10021-3375

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

Name of Employer Occupation
MERMEL & MCLAIN REAL ESTATE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
01 / 20 / 2010

Transaction ID: SA11.388

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. MYERS MERMEL

Mailing Address 300 E. 75TH STREET

City State Zip Code
NEW YORK NY 10021-3375

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

Name of Employer Occupation
MERMEL & MCLAIN REAL ESTATE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
01 / 20 / 2010

Transaction ID: SA11.596

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVEN MIHAYLO

Mailing Address P.O. BOX 19790

City State Zip Code
RENO NV 89511-2471

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
02 / 15 / 2010

Transaction ID: SA11.3

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SPIROS MILONAS

Mailing Address 171 W 57TH ST

City State Zip Code
NEW YORK NY 10019-2203

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: SA11.417

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
DR. PAMELA J. NEWMAN

Mailing Address 199 WATER STREET
84TH FLOOR

City State Zip Code
NEW YORK NY 10038-3526

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

Name of Employer Occupation
AON RISK SERVICES EXECUTIVE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.418

Amount of Each Receipt this Period
350.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN NUNN

Mailing Address 1 CREST ROAD WEST

City State Zip Code
ROLLING HILLS CA 90274-5002

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

Name of Employer Occupation
SELF EMPLOYED SALES

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11.525

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MAUREEN D NUNN

Mailing Address 1 CREST ROAD WEST

City State Zip Code
ROLLING HILLS CA 90274-5002

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

Name of Employer Occupation
SELF EMPLOYED EDUCATION

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11.524

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **5150.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
JOHN M. OSTROM

Mailing Address 850 WEST 43RD STREET

City HOUSTON State TX Zip Code 77018-4404

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

Name of Employer BRAND ENERGY AND INFRASTRUCTURE SERVICE Occupation HR MANAGER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2010
Transaction ID: SA11.120
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SHAHRYAR OVEISSI

Mailing Address 73 WEAVER ST. APT. 4

City GREENWICH State CT Zip Code 06831-5164

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

Name of Employer OC GLOBAL PARTNERS Occupation PARTNERS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2010
Transaction ID: SA11.419
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MITZI H. PERDUE

Mailing Address 238 MILDALE RD

City SALISBURY State MD Zip Code 21804-7302

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2010
Transaction ID: SA11.420
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

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

FOR LINE NUMBER: PAGE 48 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
JOHN PHELAN
Mailing Address 645 FIFTH AVENUE
City NEW YORK State NY Zip Code 10022-5910
FEC ID number of contributing federal political committee. **C**
Name of Employer M.S.D. CAPITAL Occupation INVESTMENT MANAGER
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 4800.00
Date of Receipt 02 / 15 / 2010
Transaction ID: SA11.5
Amount of Each Receipt this Period 2400.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN PHELAN
Mailing Address 645 FIFTH AVENUE
City NEW YORK State NY Zip Code 10022-5910
FEC ID number of contributing federal political committee. **C**
Name of Employer M.S.D. CAPITAL Occupation INVESTMENT MANAGER
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 4800.00
Date of Receipt 02 / 15 / 2010
Transaction ID: SA11.5B
Amount of Each Receipt this Period 2400.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LARRY PRESSLER
Mailing Address 800 25TH STREET NW
City WASHINGTON State DC Zip Code 20037-2208
FEC ID number of contributing federal political committee. **C**
Name of Employer ATTORNEY Occupation PRESSLER GROUP
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 500.00
Date of Receipt 02 / 22 / 2010
Transaction ID: SA11.17
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5300.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 49 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MRS. LILA D. PROUNIS

Mailing Address 177 E. 75TH STREET

City State Zip Code
NEW YORK NY 10021-3230

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.435

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PINCHUS RAICE

Mailing Address 525 E. 72ND STREET
APT. 18-I

City State Zip Code
NEW YORK NY 10021-9606

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

Name of Employer PRYOR CASHMAN LLP
Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.421

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID RAPPA

Mailing Address 161 GRAND STREET
APT. 8A

City State Zip Code
NEW YORK NY 10013-3147

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.422

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 50 / 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial)
MRS. MELANIE ROTHENBERG

Mailing Address 140 EAST 72ND STREET

City State Zip Code
NEW YORK NY 10021-4268

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

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.424

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL ROTHENBERG

Mailing Address 140 EAST 72ND STREET

City State Zip Code
NEW YORK NY 10021-4268

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

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.423

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DONALD RUMSFIELD

Mailing Address P.O. BOX 1710

City State Zip Code
EL PRADO NM 87529-1710

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

Name of Employer
SELF EMPLOYED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Occupation

SELF EMPLOYED

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11.587

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 51 / 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial)
MRS. JOYCE RUMSFIELD
Mailing Address P.O. BOX 1710

City State Zip Code
EL PRADO NM 87529

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

Name of Employer Occupation
NOT EMPLOYED NOT EMPLOYED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11.614

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ANDREW SAUL
Mailing Address 300 MAPLE AVENUE
P.O. BOX 635

City State Zip Code
KATONAH NY 10536-0635

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.425

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN E. SCHMELTZER, III
Mailing Address 21 HAWKWOOD

City State Zip Code
GREENWICH CT 06830-3924

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

Name of Employer Occupation
PATTERSON BELKNAP WEBB&TY-
LERLLP LAWYER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.330

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) JOSEPH SCHMUCKLER	Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2010
	Mailing Address P.O. BOX 181	Transaction ID: SA11.324
	City State Zip Code NEW VERNON NJ 07976-0181	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation MITSUBISHI UFJ SECURITIES BANKING	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) MR. CYRUS SCHWARTZ	Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2010
	Mailing Address 225 W. 83RD ST. APT. 5E	Transaction ID: SA11.428
	City State Zip Code NEW YORK NY 10024-4954	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MR. DAVID SCHWARTZ	Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2010
	Mailing Address 12 KNOLL LANE	Transaction ID: SA11.427
	City State Zip Code ROSLYN HEIGHTS NY 11577-2608	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	4400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. STEPHEN SCHWARZMAN

Mailing Address 345 PARK AVENUE
31ST FLOOR

City NEW YORK State NY Zip Code 10154-0004

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

Name of Employer BLACKSTONE Occupation CHAIRMAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.392
 Amount of Each Receipt this Period: 2400.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN SCHWARZMAN

Mailing Address 345 PARK AVENUE
31ST FLOOR

City NEW YORK State NY Zip Code 10154-0004

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

Name of Employer BLACKSTONE Occupation CHAIRMAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.598
 Amount of Each Receipt this Period: 2400.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. YITZCHOK SCHWARTZ

Mailing Address 19 RODNEY STREET

City BROOKLYN State NY Zip Code 11211-7503

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

Name of Employer B & H STAFFING Occupation EXECUTIVE

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.426
 Amount of Each Receipt this Period: 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5800.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
LILIANE WINE SHALOM

Mailing Address 641 FIFTH AVENUE
#33D

City State Zip Code
NEW YORK NY 10022-5908

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

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2010

Transaction ID: SA11.494

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEOFFARY SHEPARD

Mailing Address 40 MONUMENT RD

City State Zip Code
BALA CYNWYD PA 19004-1700

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

Name of Employer Occupation
KARR BARTH ASSOC EXECUTIVE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.482

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH P. SIRACUSANO

Mailing Address 333 E. 66TH STREET
APT. 3L

City State Zip Code
NEW YORK NY 10065-6271

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11.429

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
CATHY SOREF

Mailing Address 6 WILLIS AVENUE

City State Zip Code
SYOSSET NY 11791-3703

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

Name of Employer Occupation
SELF EMPLOYED PHILANTHROPIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	1	0

Transaction ID: SA11.323

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JERRY STEINBORN

Mailing Address 32 S. WASHINGTON CIRCLE

City State Zip Code
HINSDALE IL 60521-4532

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

Name of Employer Occupation
SIG TRADER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

Transaction ID: SA11.237

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ARMANDO A. TABERNILLA

Mailing Address 213 E. LAKEWOOD RD.

City State Zip Code
WEST PALM BEACH FL 33405-3315

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

Name of Employer Occupation
FLORIDA CRYSTALS CORP MANAGER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11.533

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

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

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

FOR LINE NUMBER: PAGE 56 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
CHRIS TERYAZOS

Mailing Address 220 EAST 75TH STREET
APR. 9C

City State Zip Code
NEW YORK NY 10021-2917

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

Name of Employer Occupation
FINANCE P.C.G. & CO.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	1	0

Transaction ID: SA11.19

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANDREW CHARLES TSUNIS

Mailing Address 309 WEST 57TH STREET
APT. 807

City State Zip Code
NEW YORK NY 10019

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11.613

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANK URSOMARSO

Mailing Address P.O. BOX 2508

City State Zip Code
WILMINGTON DE 19805-0508

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

Name of Employer Occupation
UNION PARK AUTOMOTIVE EXECUTIVE

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11.510

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MR. PETER VLACHOS		Date of Receipt	
	Mailing Address 245 WEST 107TH STREET APT. 3H		M M / D D / Y Y Y Y Y 03 / 29 / 2010	
	City	State	Zip Code	Transaction ID: SA11.430
	NEW YORK	NY	10025-3052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) STEVEN WACASTER		Date of Receipt	
	Mailing Address 157 E. 81ST ST. APT. 6A		M M / D D / Y Y Y Y Y 03 / 05 / 2010	
	City	State	Zip Code	Transaction ID: SA11.20
	NEW YORK	NY	10028-1844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer FINANCE		Occupation PEGASUS CAPITAL		CONTRIBUTION
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		

C.	Full Name (Last, First, Middle Initial) MRS. ANNE WALKER		Date of Receipt	
	Mailing Address 550 GOLF CREEK RANCH		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11.527
	JACKSON	WY	83001-9076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. RON WALKER

Mailing Address 550 GOLF CREEK RANCH

City JACKSON State WY Zip Code 83001-9076

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

Name of Employer NIXON FOUNDATION Occupation PRESIDENT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11.526
 Amount of Each Receipt this Period: 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD WEINBERG

Mailing Address 60 EVERETT RD

City DEMAREST State NJ Zip Code 07627-1225

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

Name of Employer PEGASUS CAPITAL Occupation EXECUTIVE

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 29 / 2010
Transaction ID: SA11.431
 Amount of Each Receipt this Period: 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LEE WEINGART

Mailing Address 1600 ALDERSYDE DR.

City SHAKER HEIGHTS State CA Zip Code 44129

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

Name of Employer LNE GROUP Occupation LOBBYIST

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11.528
 Amount of Each Receipt this Period: 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

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

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

FOR LINE NUMBER: PAGE 59 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
MR. DAVID WEISZ

Mailing Address 1139 57TH STREET

City State Zip Code
BROOKLYN NY 11219-4522

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

Name of Employer Occupation
IBE TRADE BUSINESS ADMINSTRATOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	0

Transaction ID: SA11.432

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRED WHITAKER

Mailing Address 631 E. JEFFERSON AVENUE

City State Zip Code
ORANGE CA 92866-1105

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

Name of Employer Occupation
CUMMINS & WHITE ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: SA11.309

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN WHITEHEAD

Mailing Address 55 EAST 52ND STREET
34TH FLOOR

City State Zip Code
NEW YORK NY 10055-0002

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

Name of Employer Occupation
AEA INVESTORS CHAIRMAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	0

Transaction ID: SA11.505

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 60 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
AMB. JOSEPH ZAPPALA

Mailing Address 19955 NE 38TH STREET
APT. 806

City State Zip Code
AVENTURA FL 33180-3429

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	0

Transaction ID: SA11.433

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Knickerbocker Consulting LLC

Mailing Address 137 Wintre St

City State Zip Code
Troy NY 12180

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	0

Transaction ID: SA1199

Amount of Each Receipt this Period
250.00

Contribution

See Attribution

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY D. CLEARY

Mailing Address 137 WINTER STREET

City State Zip Code
TROY NY 12180-7871

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

Name of Employer KNICKBROCKER CONSULTING LLC Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	0

Transaction ID: SA11.606

Amount of Each Receipt this Period
250.00

CONTRIBUTION

[MEMO ITEM]
Attribution from Partnership

SUBTOTAL of Receipts This Page (optional) ► **2650.00**

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

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

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

FOR LINE NUMBER: PAGE 61 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
The Law Offices of Offer Waide

Mailing Address 230 West 54th Street

City State Zip Code
New York NY 10019

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2010

Transaction ID: SA11.PTNS

Amount of Each Receipt this Period
2400.00

Contribution

See Partnership Attribution

B. Full Name (Last, First, Middle Initial)
MR. OFFER WAIDE

Mailing Address 230 WEST 54TH STREET

City State Zip Code
NEW YORK NY 10019-5502

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2010

Transaction ID: SA11.607

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

[MEMO ITEM]
Attribution from Partnership

C. Full Name (Last, First, Middle Initial)
The Law Offices of Offer Waide

Mailing Address 230 West 54th Street

City State Zip Code
New York NY 10019

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2010

Transaction ID: SA11.PTNSB

Amount of Each Receipt this Period
2400.00

Contribution

See Partnership Attribution

SUBTOTAL of Receipts This Page (optional) ► **4800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 62 / 87	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) MR. OFFER WAIDE		Date of Receipt
	Mailing Address 230 WEST 54TH STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	NEW YORK	NY	10019-5502
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.608
	C		Amount of Each Receipt this Period
Name of Employer SELF EMPLOYED		Occupation ATTORNEY	CONTRIBUTION
Receipt For: 2010		Election Cycle-to-Date ▼	[MEMO ITEM]
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General		Attribution from Partners-hip
<input type="checkbox"/> Other (specify) ▼		4800.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	207552.00

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

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

FOR LINE NUMBER: PAGE 63 / 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A. Full Name (Last, First, Middle Initial)
COUNTRY FIRST PAC

Mailing Address 228 S WASHINGTON ST.
STE 115

City State Zip Code
ALEXANDRA VA 22314

FEC ID number of contributing federal political committee. **C** C00457705

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 29 / 2010

Transaction ID: SA11.610

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TENNPAC

Mailing Address 6213 CHARLOTTE AVE
SUITE 112

City State Zip Code
NASHVILLE TN 37209

FEC ID number of contributing federal political committee. **C** C00388421

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 29 / 2010

Transaction ID: SA11.609

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

TOTAL This Period (last page this line number only) ► **3000.00**

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 / 87
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 11d
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial) Mr. Chris N Cox		Date of Receipt
Mailing Address 100 Seafield Lane		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
City	State	Zip Code
Westhampton Beach	NY	11978
FEC ID number of contributing federal political committee.		Transaction ID: SA11D.001
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="13000.00"/>
Name of Employer Chris Cox for Congress	Occupation Candidate	In-kind Contribution Received from Cand.
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="13000.00"/>	Website Services - B Fresh Consulting

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="13000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="13000.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 87
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Chris N Cox

Mailing Address 100 Seafield Lane

City State Zip Code
Westhampton Beach NY 11978

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

Name of Employer Occupation
Chris Cox for Congress Candidate

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500000.00

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

Transaction ID: SC2

Amount of Each Receipt this Period
500000.00

Loans Received from the Candidate

SUBTOTAL of Receipts This Page (optional)	▶	500000.00
TOTAL This Period (last page this line number only)	▶	500000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 66 / 87

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) Chris N Cox Mailing Address 100 Seafield Lane City Westhampton Beach State NY Zip Code 11978 Purpose of Disbursement In-Kind Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.CAND Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 0 Amount of Each Disbursement this Period 13000.00 B Fresh Consulting
B.	Full Name (Last, First, Middle Initial) David Atkins Mailing Address 55 West 26th St City New York State NY Zip Code 10010 Purpose of Disbursement Payroll - Finance Director Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC38 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 0 Amount of Each Disbursement this Period 3000.00
C.	Full Name (Last, First, Middle Initial) Eileen Laffey Mailing Address 30 Reeves Road City Port Jefferson State NY Zip Code 11777 Purpose of Disbursement Staff Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC82 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0 Amount of Each Disbursement this Period 975.00

SUBTOTAL of Disbursements This Page (optional) ▶	16975.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) Michael Levoff Mailing Address 101 West 24th St. City New York State NY Zip Code 10011 Purpose of Disbursement Payroll - Communications Director Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC21 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 1 0 Amount of Each Disbursement this Period 2444.22 Category/Type 000
B.	Full Name (Last, First, Middle Initial) Michael Levoff Mailing Address 101 West 24th St. City New York State NY Zip Code 10011 Purpose of Disbursement Payroll - Communications Director Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC39 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 0 Amount of Each Disbursement this Period 2444.22 Category/Type 000
C.	Full Name (Last, First, Middle Initial) Michael Levoff Mailing Address 101 West 24th St. City New York State NY Zip Code 10011 Purpose of Disbursement Reimbursement: See Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC46 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 0 Amount of Each Disbursement this Period 2923.43 Category/Type 000

SUBTOTAL of Disbursements This Page (optional) ▶	7811.87
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 60 Massachusetts Ave. NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Train Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: GINN1</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="288.00"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lenovo</p> <p>Mailing Address 1009 Think Place</p> <p>City Marrisville State NC Zip Code 27560</p> <p>Purpose of Disbursement Staff Laptop</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: GINN8</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1401.23"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Roll Call</p> <p>Mailing Address 50 F St. NW STE 700</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: GINN10</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="310.00"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) The Dupont Hotel	Transaction ID: GINN12 Date of Disbursement 02 / 20 / 2010
	Mailing Address 1500 New Hampshire Ave. NW	Amount of Each Disbursement this Period 603.38
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Staff Computer Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Michael Levoff	Transaction ID: CCFC65 Date of Disbursement 03 / 16 / 2010
	Mailing Address 101 West 24th St.	Amount of Each Disbursement this Period 2444.22
	City New York State NY Zip Code 10011	
	Purpose of Disbursement Payroll - Communications Director Candidate Name	Category/Type 000
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Levoff	Transaction ID: CCFC67 Date of Disbursement 03 / 16 / 2010
	Mailing Address 101 West 24th St.	Amount of Each Disbursement this Period 1607.16
	City New York State NY Zip Code 10011	
	Purpose of Disbursement Payroll - Communications Director Candidate Name	Category/Type 000
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4051.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) Brent Perrin	Transaction ID: CCFC68 Date of Disbursement 03 / 16 / 2010
	Mailing Address 30 Reeves Road	Amount of Each Disbursement this Period 1523.86
	City Port Jefferson State NY Zip Code 11777	
	Purpose of Disbursement Payroll - Political Director Candidate Name	000 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bradley White	Transaction ID: CCFC06 Date of Disbursement 02 / 02 / 2010
	Mailing Address 325 East 92nd St	Amount of Each Disbursement this Period 4234.04
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Payroll - Campaign Manager Candidate Name	000 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bradley White	Transaction ID: CCFC13 Date of Disbursement 02 / 10 / 2010
	Mailing Address 325 East 92nd St	Amount of Each Disbursement this Period 220.00
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Reimbursement - CPAC NY Registration Candidate Name	000 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5977.90

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

<p>A. Full Name (Last, First, Middle Initial) Bradley White</p> <p>Mailing Address 325 East 92nd St</p> <p>City New York State NY Zip Code 10128</p> <p>Purpose of Disbursement Payroll - Campaign Manager Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: CCFC22 Date of Disbursement 02 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 2117.03</p> <p>000 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Bradley White</p> <p>Mailing Address 325 East 92nd St</p> <p>City New York State NY Zip Code 10128</p> <p>Purpose of Disbursement Reimbursement: See Below Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: CCFC24 Date of Disbursement 02 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1082.47</p> <p>000 Category/Type</p> <p>Hertz Rental Car - \$234.39 Mayflower Hotel - \$448.92 Amtrak \$201</p>
<p>C. Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 60 Massachusetts Ave. NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Train Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: GINN2 Date of Disbursement 02 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 74.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3199.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 60 Massachusetts Ave. NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Train Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: GINN3 Date of Disbursement 02 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 127.00</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hertz</p> <p>Mailing Address East 90th St</p> <p>City New York State NY Zip Code 10128</p> <p>Purpose of Disbursement Rental Car</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: GINN7 Date of Disbursement 01 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 234.39</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mayflower Hotel</p> <p>Mailing Address 1127 Connecticut Avenue NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: GINN9 Date of Disbursement 02 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 448.92</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) Bradley White Mailing Address 325 East 92nd St City New York State NY Zip Code 10128 Purpose of Disbursement Payroll - Campaign Manager Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC29 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 0 Amount of Each Disbursement this Period 2117.03 Category/Type 000
B.	Full Name (Last, First, Middle Initial) Bradley White Mailing Address 325 East 92nd St City New York State NY Zip Code 10128 Purpose of Disbursement Reimbursement: See Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC51 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 0 Amount of Each Disbursement this Period 789.56 Category/Type 000
C.	Full Name (Last, First, Middle Initial) Delta Airlines Mailing Address 1030 Delta Blvd. City Atlanta State GA Zip Code 30320 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: GINN6 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 1 0 Amount of Each Disbursement this Period 234.70 Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

2906.59

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) Bradley White	Transaction ID: CCFC66 Date of Disbursement 03 / 16 / 2010
	Mailing Address 325 East 92nd St	Amount of Each Disbursement this Period 2117.03
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Payroll Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bradley White	Transaction ID: CCFC76 Date of Disbursement 03 / 25 / 2010
	Mailing Address 325 East 92nd St	Amount of Each Disbursement this Period 1114.78
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Reimbursement: See Below Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Westin - \$329.71, Amtrak \$247.00

C.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: GINN4 Date of Disbursement 03 / 15 / 2010
	Mailing Address 60 Massachusetts Ave. NE	Amount of Each Disbursement this Period 225.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Train Travel Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	3231.81
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: GINN5 Date of Disbursement 03 / 16 / 2010
	Mailing Address 60 Massachusetts Ave. NE	Amount of Each Disbursement this Period 22.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Train Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: GINN11 Date of Disbursement 03 / 16 / 2010
	Mailing Address 2702 Love Field Drive	Amount of Each Disbursement this Period 171.70
	City Dallas State TX Zip Code 75235	
	Purpose of Disbursement Airfare	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Westin	Transaction ID: GINN13 Date of Disbursement 03 / 15 / 2010
	Mailing Address 1400 M Street, NW	Amount of Each Disbursement this Period 329.71
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Lodging	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) 180 East Main LLC - Damianos Relaty Group</p> <p>Mailing Address 222 Middle Country Road</p> <p>City Smithtown State NY Zip Code 11787</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC78</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) B-Fresh Consulting</p> <p>Mailing Address 816 Elm St</p> <p>City Manchester State NH Zip Code 03101</p> <p>Purpose of Disbursement Website, Retainer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC45</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13000.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) BaseLine Consulting</p> <p>Mailing Address 11 Stoney Hill Road</p> <p>City New Hope State PA Zip Code 18938</p> <p>Purpose of Disbursement Research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC74</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

<p>A. Full Name (Last, First, Middle Initial) Best Buy</p> <p>Mailing Address 261 Pond Path</p> <p>City South Setauket State NY Zip Code 11720</p> <p>Purpose of Disbursement Office Computer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: CCFC54</p> <p>Date of Disbursement 03 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 515.93</p> <p>000 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Cablevision</p> <p>Mailing Address PO Box 371378</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Cable, Internet, Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: CCFC53</p> <p>Date of Disbursement 03 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 543.82</p> <p>000 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Campaign Tel Ltd.</p> <p>Mailing Address 15 East 74th Street</p> <p>City New York State NY Zip Code 10021</p> <p>Purpose of Disbursement Voter Outreach Phone Call</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: CCFC56</p> <p>Date of Disbursement 03 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p>000 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11059.75

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 Leesburg Pike City Falls Church State VA Zip Code 22043 Purpose of Disbursement Fundraising Database Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC81 Date of Disbursement 03 / 30 / 2010	Amount of Each Disbursement this Period 800.00
B.	Full Name (Last, First, Middle Initial) Continental Airlines Mailing Address 1600 Smith Street City Houston State TX Zip Code 77002 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC79 Date of Disbursement 03 / 29 / 2010	Amount of Each Disbursement this Period 679.70
C.	Full Name (Last, First, Middle Initial) Continental Airlines Mailing Address 1600 Smith Street City Houston State TX Zip Code 77002 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC80 Date of Disbursement 03 / 29 / 2010	Amount of Each Disbursement this Period 679.70

SUBTOTAL of Disbursements This Page (optional) ▶

2159.40

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

<p>A. Full Name (Last, First, Middle Initial) Data Tech Solutions</p> <p>Mailing Address 200 McCormick Dr.</p> <p>City Bohemia State NY Zip Code 11716</p> <p>Purpose of Disbursement Stationary, Letterhead & Business Cards</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC40</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="870.09"/></p>
<p>B. Full Name (Last, First, Middle Initial) Diaz Communications</p> <p>Mailing Address 9911 Oleander Avenue</p> <p>City Vienna State VA Zip Code 22181</p> <p>Purpose of Disbursement Communications Strategy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC73</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7500.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Direct Response Strategies</p> <p>Mailing Address 4025 Ellicott Street</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement Fundraising Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC64</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6596.46"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) ESA Long Island	Transaction ID: CCFC47 Date of Disbursement 03 / 03 / 2010
	Mailing Address 100 Spagnoli Rd	Amount of Each Disbursement this Period 742.28
	City Melville State NY Zip Code 11747	
	Purpose of Disbursement Staff Rent Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ESA Long Island	Transaction ID: CCFC52 Date of Disbursement 03 / 04 / 2010
	Mailing Address 100 Spagnoli Rd	Amount of Each Disbursement this Period 742.28
	City Melville State NY Zip Code 11747	
	Purpose of Disbursement Staff Rent Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hertz	Transaction ID: CCFC07 Date of Disbursement 02 / 05 / 2010
	Mailing Address East 90th St	Amount of Each Disbursement this Period 333.83
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Rental Car Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1818.39

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) JetBlue Airlines	Transaction ID: CCFC30 Date of Disbursement 03 / 01 / 2010
	Mailing Address 6322 S. 3000 E. Ste G50	Amount of Each Disbursement this Period 584.40
	City Salt Lake City State UT Zip Code 84121	
	Purpose of Disbursement Airfare Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JetBlue Airlines	Transaction ID: CCFC32 Date of Disbursement 03 / 01 / 2010
	Mailing Address 6322 S. 3000 E. Ste G50	Amount of Each Disbursement this Period 469.40
	City Salt Lake City State UT Zip Code 84121	
	Purpose of Disbursement Airfare Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JetBlue Airlines	Transaction ID: CCFC33 Date of Disbursement 03 / 01 / 2010
	Mailing Address 6322 S. 3000 E. Ste G50	Amount of Each Disbursement this Period 260.00
	City Salt Lake City State UT Zip Code 84121	
	Purpose of Disbursement Airfare Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1313.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) JPA Studios <hr/> Mailing Address 81 Meadow Pond Circle <hr/> City Miller Place State NY Zip Code 11764 <hr/> Purpose of Disbursement Photography Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC26 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 271.62
B.	Full Name (Last, First, Middle Initial) Paypal <hr/> Mailing Address 2065 Hamilton Ave <hr/> City San Jose State CA Zip Code 95125 <hr/> Purpose of Disbursement Credit Card Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB0003 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1576.56
C.	Full Name (Last, First, Middle Initial) Southwest Airlines <hr/> Mailing Address 27021 Love Field Drive <hr/> City Dallas State TX Zip Code 75235 <hr/> Purpose of Disbursement Airfare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC41 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 314.70

SUBTOTAL of Disbursements This Page (optional) ▶	2162.88
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address 2702 Love Field Drive City Dallas State TX Zip Code 75235 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC49 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 0 Amount of Each Disbursement this Period 239.70 000 Category/ Type
B.	Full Name (Last, First, Middle Initial) Staples Mailing Address 5003 Jericho Turnpike City Commack State NY Zip Code 11725 Purpose of Disbursement Printer, Copier, Fax, Paper Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC03 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 1 0 Amount of Each Disbursement this Period 838.56 000 Category/ Type
C.	Full Name (Last, First, Middle Initial) Staples Mailing Address 40 Loehmanns Plaza City Lake Grove State NY Zip Code 11755 Purpose of Disbursement Staff Laptop Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CCFC31 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 0 Amount of Each Disbursement this Period 577.46 000 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1655.72

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

<p>A. Full Name (Last, First, Middle Initial) Strategic Perception</p> <p>Mailing Address 6158 Mulholland Highway</p> <p>City Hollywood State CA Zip Code 90068</p> <p>Purpose of Disbursement Media Strategy Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC58 Date of Disbursement: 03 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Category/Type: 000</p>
<p>B. Full Name (Last, First, Middle Initial) Strategic Planning Systems Inc.</p> <p>Mailing Address 150 Knickerbocker Ave</p> <p>City Bohemia State NY Zip Code 11716</p> <p>Purpose of Disbursement Voter File Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC59 Date of Disbursement: 03 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1800.00</p> <p>Category/Type: 000</p>
<p>C. Full Name (Last, First, Middle Initial) The Network Companies</p> <p>Mailing Address 285 Hayground Road</p> <p>City Watermill State NY Zip Code 11976</p> <p>Purpose of Disbursement General Strategy & Research Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: CCFC09 Date of Disbursement: 02 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>Category/Type: 000</p>

SUBTOTAL of Disbursements This Page (optional)	21800.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: CCFC27 Date of Disbursement 02 / 26 / 2010
	Mailing Address 111 W. Rio Salado Parkway	Amount of Each Disbursement this Period 234.70
	City Tempe State AZ Zip Code 85281	
	Purpose of Disbursement Airfare Candidate Name	000 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: CCFC28 Date of Disbursement 02 / 26 / 2010
	Mailing Address 111 W. Rio Salado Parkway	Amount of Each Disbursement this Period 234.70
	City Tempe State AZ Zip Code 85281	
	Purpose of Disbursement Airfare Candidate Name	000 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: CCFC69 Date of Disbursement 03 / 16 / 2010
	Mailing Address 25 Route 111	Amount of Each Disbursement this Period 308.00
	City Smithtown State NY Zip Code 11787	
	Purpose of Disbursement Postage Candidate Name	000 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

777.40

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chris Cox for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: CCFC50 Date of Disbursement 03 / 04 / 2010
	Mailing Address 20 Alexander Drive	Amount of Each Disbursement this Period 1376.23
	City Wallingford State CT Zip Code 06492	
	Purpose of Disbursement Staff Blackberry Devices & Service Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Virgin America Airline	Transaction ID: CCFC75 Date of Disbursement 03 / 25 / 2010
	Mailing Address 555 Airport Blvd. Fl 2	Amount of Each Disbursement this Period 2054.10
	City Burlingame State CA Zip Code 94010	
	Purpose of Disbursement Airfare Candidate Name	000 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

3430.33

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

122798.27

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
Chris Cox for Congress

Transaction ID: SC1

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Chris N Cox - Personal Funds Made from Personal Funds		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 100 Seafield Lane		
City Westhampton Beach	State NY	ZIP Code 11978
Original Amount of Loan 500000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500000.00

TERMS

Date Incurred M M 03 D D 31 Y Y Y Y 2010	Date Due None	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional) ▶	500000.00
TOTALS This Period (last page in this line only) ▶	500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.