

# 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

Committee to Elect McHugh

ADDRESS (number and street) 228 S. Washington St., Ste. 115

Check if different than previously reported. (ACC)

Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00272153

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

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

NY 23

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 09 09 2008 in the State of VA

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

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

Election on in the State of

5. Covering Period 07 01 2008 through 08 20 2008

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 Robert Taub

Signature of Treasurer Electronically Filed by Robert Taub Date 08 26 2008

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

Write or Type Committee Name

Committee to Elect McHugh

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	8

D	D
2	0

Y	Y	Y	Y
2	0	0	8

	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)).....	57900.00	558322.99
(b) Total Contribution Refunds (from Line 20(d)).....	1000.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	56900.00	556822.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	28444.15	249969.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	6595.96
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28444.15	243373.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	299377.90	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
Committee to Elect McHugh

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	8

D	D
2	0

Y	Y	Y	Y
2	0	0	8

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	21325.00	157700.56
(i) Itemized (use Schedule A).....	2575.00	7410.00
(ii) Unitemized.....	23900.00	165110.56
(iii) TOTAL of contributions from individuals..... ▶	1000.00	1200.00
(b) Political Party Committees.....	33000.00	392012.43
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	57900.00	558322.99
(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.....		
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	57900.00	570722.26

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	28444.15	249969.55
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.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1500.00
21. OTHER DISBURSEMENTS.....	105220.00	124670.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	134664.15	376139.55

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	376142.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	57900.00
25. SUBTOTAL (add Line 23 and Line 24).....	434042.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	134664.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	299377.90

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 38  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steven Allison</p> <p>Mailing Address 4855 Surry Ln</p> <p>City State Zip Code Murrells Inlet SC 29576-5842</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Atlantic Coast Enterprises Executive</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 20 / 2008</span></p> <p><b>Transaction ID:</b> 80824.C2393</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Harris Bak</p> <p>Mailing Address 132 Overlook Rd.</p> <p>City State Zip Code New Rochelle NY 10804</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Milliman USA Executive</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 20 / 2008</span></p> <p><b>Transaction ID:</b> 80824.C2394</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2300.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Stanley Bernstein</p> <p>Mailing Address 300 Trenor Dr.</p> <p>City State Zip Code West Harrison NY 10604</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Self Attorney</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 20 / 2008</span></p> <p><b>Transaction ID:</b> 80824.C2396</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3300.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 38

(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)  
Committee to Elect McHugh

**A.**

Full Name (Last, First, Middle Initial)  
Ronald Bindow

Mailing Address 32 Cooper Rd

City State Zip Code  
Scarsdale NY 10583-2832

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Insurance

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 20 / 2008

**Transaction ID:** 80824.C2397

Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Nancy K. Breslin

Mailing Address 45496 Landon Rd.

City State Zip Code  
Wellesley Island NY 13640

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt 08 / 15 / 2008

**Transaction ID:** 80824.C2357

Amount of Each Receipt this Period 125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
A. Bradford Card

Mailing Address 896 Helga Pl

City State Zip Code  
McLean VA 22102-2164

FEC ID number of contributing federal political committee. C

Name of Employer The Dutko Group Occupation Sr. Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2008

**Transaction ID:** 80824.C2398

Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1625.00

**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: <input 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	PAGE 7 / 38
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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

<b>A.</b>	Full Name (Last, First, Middle Initial) Albert R. Chance		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 2 Piping Brook Ln.		<b>Transaction ID:</b> 80824.C2399
	City Bedford	State NY	Zip Code 10506
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
	Name of Employer Expressway Lube Centers	Occupation Executive	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00
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<b>B.</b>	Full Name (Last, First, Middle Initial) Doris Chance		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 2 Piping Brook Ln		<b>Transaction ID:</b> 80824.C2400
	City Bedford	State NY	Zip Code 10506-2208
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
	Name of Employer Prudential Holmes & Kennedy	Occupation Executive	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00
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<b>C.</b>	Full Name (Last, First, Middle Initial) Judith J. Foster		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 10503 Quebec Head Rd.		<b>Transaction ID:</b> 80824.C2356
	City Clayton	State NY	Zip Code 13624
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Homemaker	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4200.00
<b>TOTAL</b> 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 8 / 38
	<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)  
Committee to Elect McHugh

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Girsky		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 1354 Flagler Dr.		<b>Transaction ID:</b> 80824.C2401
	City Mamaroneck	State NY	Zip Code 10543
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Morgan Stanley	Occupation Analyst	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Geoffrey Gleason		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 6126 11th Rd N		<b>Transaction ID:</b> 80824.C2402
	City Arlington	State VA	Zip Code 22205-1704
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Livingston Group	Occupation Government Relations	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joel Greenspan		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 6 Oak Ridge Ct.		<b>Transaction ID:</b> 80824.C2403
	City Armonk	State NY	Zip Code 10504
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Self	Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> 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 9 / 38  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
Andrew Kramer  
 Mailing Address 58 Jackson Rd  
 City Bedford State NY Zip Code 10506-2205  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Otterbourg Steindler Occupation Executive  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID:** 80824.C2404  
 Amount of Each Receipt this Period 250.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Eric Mandel  
 Mailing Address 211 E. 70th St.  
 City New York State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Self Occupation Physician  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID:** 80824.C2405  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ted Mascott  
 Mailing Address 37331 NYS Rt. 12E  
 PO Box 40  
 City Clayton State NY Zip Code 13624  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Retired Occupation retired  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1200.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID:** 80824.C2372  
 Amount of Each Receipt this Period 200.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1450.00

**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 10 / 38

(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)  
Committee to Elect McHugh

**A.**

Full Name (Last, First, Middle Initial)  
Sheryl McGrath

Mailing Address 1714 Esquire Ln

City State Zip Code  
Mc Lean VA 22101-4754

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
08 / 20 / 2008

**Transaction ID:** 80824.C2406

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Jacob Miles

Mailing Address 4 Gate House Rd.

City State Zip Code  
Scarsdale NY 10583

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Kelley Drye Warren Executive

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
08 / 20 / 2008

**Transaction ID:** 80824.C2407

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Richard Pietrafesa

Mailing Address 104 Wendell Terrace

City State Zip Code  
Syracuse NY 13203

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Destiny USA Executive

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
08 / 01 / 2008

**Transaction ID:** 80824.C2352

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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 11 / 38  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
Richard Pietrafesa

Mailing Address 104 Wendell Terrace

City State Zip Code  
Syracuse NY 13203

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

Name of Employer: Destiny USA   Occupation: Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1200.00

Date of Receipt: 08 / 20 / 2008  
**Transaction ID:** 80824.C2369  
 Amount of Each Receipt this Period: 200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Daniel Ramras

Mailing Address 320 Strawberry Hill Ave., 22

City State Zip Code  
Stamford CT 06902

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

Name of Employer: Atlantic Coast Enterprises   Occupation: Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 08 / 20 / 2008  
**Transaction ID:** 80824.C2408  
 Amount of Each Receipt this Period: 300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mark Reichenbaum

Mailing Address 6 Lauder Way

City State Zip Code  
Greenwich CT 06830-3826

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

Name of Employer: Self   Occupation: Investor

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 08 / 20 / 2008  
**Transaction ID:** 80824.C2409  
 Amount of Each Receipt this Period: 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**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 12 / 38

(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)  
Committee to Elect McHugh

**A.**

Full Name (Last, First, Middle Initial)  
Francis Sanzone

Mailing Address 8316 Decoy Run

City Manlius State NY Zip Code 13104-9323

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Distributor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2008

**Transaction ID:** 80824.C2370

Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Anthony V. Tarzia

Mailing Address 44719 County Rt., 100-A

City Wellesley Island State NY Zip Code 13640

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2008

**Transaction ID:** 80824.C2377

Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
William Teator

Mailing Address 3 Aurora Ave

City Saratoga Springs State NY Zip Code 12866-9706

FEC ID number of contributing federal political committee. C

Name of Employer Capitol Advocates Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2008

**Transaction ID:** 80824.C2411

Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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: (check only one)	PAGE 13 / 38
	<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)  
Committee to Elect McHugh

<b>A.</b>	Full Name (Last, First, Middle Initial) Alexander Treadwell		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address PO Box 349		Transaction ID: 80824.C2412
	City Lake Placid	State NY	Zip Code 12946
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Self	Occupation Public Service	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00
---	-------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) Sadye Beth Waldenberg		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 2 Hemlock Rise		Transaction ID: 80824.C2413
	City Armonk	State NY	Zip Code 10504-3000
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Info Requested	Occupation Info Requested	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00
---	------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Stanley Wasserman		Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 214 renor Dr.		Transaction ID: 80824.C2414
	City New Rochelle	State NY	Zip Code 10801
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer SW Mgmt. LLC	Occupation Real Estate	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> 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 / 38  
(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)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
Wilson, Elser, Moskowitz, Edelman

Mailing Address & Dicker LLP  
677 N. Broadway

City Albany State NY Zip Code 12207

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

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 08 / 20 / 2008  
**Transaction ID: 80824.C2378**  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

NOTE: See Partner Item

**B.** Full Name (Last, First, Middle Initial)  
Ken Shapiro

Mailing Address 677 North Broadway

City Albany State NY Zip Code 12207

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

Name of Employer Occupation  
Wilson Esler Partner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 333.34

Date of Receipt: 08 / 20 / 2008  
**Transaction ID: 80825.C2419**  
 Amount of Each Receipt this Period: 333.34

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Partnership->Wilson, Elser, Moskowitz, Edelman

**C.** Full Name (Last, First, Middle Initial)  
Lisa Marelo

Mailing Address 677 North Broadway

City Albany State NY Zip Code 12207

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

Name of Employer Occupation  
Wilson Esler Partner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 333.33

Date of Receipt: 08 / 20 / 2008  
**Transaction ID: 80825.C2420**  
 Amount of Each Receipt this Period: 333.33

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Partnership->Wilson, Elser, Moskowitz, Edelman

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1000.00

**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 / 38  
(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)  
Committee to Elect McHugh

**A.**

Full Name (Last, First, Middle Initial)  
Jerry Hoffman

Mailing Address 677 North Broadway

City Albany State NY Zip Code 12207

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

Name of Employer Wilson Esler Occupation Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 333.33

Date of Receipt 08 / 20 / 2008

Transaction ID: 80825.C2421

Amount of Each Receipt this Period 333.33

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Partnership->Wilson, Else-  
r, Moskowitz, Edelman

**B.**

Full Name (Last, First, Middle Initial)  
Keri Zaro

Mailing Address 21 Middle Patent Rd

City Armonk State NY Zip Code 10504-2803

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

Name of Employer Self Occupation Philanthropist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2008

Transaction ID: 80824.C2415

Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	21325.00

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

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

FOR LINE NUMBER: PAGE 16 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.**

Full Name (Last, First, Middle Initial)  
American Chiropractic Assn PAC

Mailing Address Ms. Leslie Burgess  
1701 Clarendon Boulevard

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5500.00

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2008

**Transaction ID:** 80824.C2380

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
American Dental Association PAC

Mailing Address 1111 14th Street, NW  
Ste. 1100

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2008

**Transaction ID:** 80824.C2349

Amount of Each Receipt this Period  
5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
American Optometric Assoc. PAC

Mailing Address 1505 Prince St., Ste. 300

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2008

**Transaction ID:** 80824.C2383

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

**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 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
Americans for Common Sense Government

Mailing Address 610 S Boulevard

City Tampa State FL Zip Code 33606-2693

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 08 / 15 / 2008  
**Transaction ID:** 80824.C2362  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dealers Election Action Cmte. of the

Mailing Address Natl Automobile Dealers Assoc.  
8400 Westpark Drive

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt: 08 / 20 / 2008  
**Transaction ID:** 80824.C2389  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
DirecTV Group Inc. Fund-Fed PAC

Mailing Address 444 N Capitol St NW Ste 728

City Washington State DC Zip Code 20001-1512

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 08 / 20 / 2008  
**Transaction ID:** 80824.C2381  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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 18 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
DTE Energy Company PAC

Mailing Address 2000 Second Ave.

City State Zip Code  
Detroit MI 48226

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 2 0 / 2 0 0 8

**Transaction ID:** 80824.C2382

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Duke Energy PAC

Mailing Address 422 S. Church St., PB05D

City State Zip Code  
Charlotte NC 28202

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 2 0 / 2 0 0 8

**Transaction ID:** 80824.C2384

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Florida Power & Light Company PAC

Mailing Address 700 Universe Blvd.  
PO Box 14000

City State Zip Code  
North Palm Beach FL 33408

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 2 0 / 2 0 0 8

**Transaction ID:** 80824.C2385

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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 19 / 38  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
General Dynamics Volunteer Pol Fund

Mailing Address 2941 Fairview Park Drive  
Suite 100

City Falls Church State VA Zip Code 22042-4523

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt 08 / 15 / 2008  
**Transaction ID:** 80824.C2360  
Amount of Each Receipt this Period 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
General Dynamics Volunteer Pol Fund

Mailing Address 2941 Fairview Park Drive  
Suite 100

City Falls Church State VA Zip Code 22042-4523

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID:** 80824.C2386  
Amount of Each Receipt this Period 2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave., NW  
Suite 1100

City Washington State DC Zip Code 20004-2407

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 08 / 15 / 2008  
**Transaction ID:** 80824.C2361  
Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00

**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 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
Lockheed Martin Employees PAC

Mailing Address Attn: Stephen Chaudet  
1550 Crystal Dr., Ste. 300

City Arlington State VA Zip Code 22202

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

Name of Employer Occupation  
Legislative Affairs

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 8 / 1 5 / 2 0 0 8

**Transaction ID:** 80824.C2359

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Machinists Non-partisan Political League

Mailing Address Mr. Richard Michalski  
9000 Machinists Place

City Upper Marlboro State MD Zip Code 20772

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 8 / 1 5 / 2 0 0 8

**Transaction ID:** 80824.C2363

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Natl Assn Of Home Builders/BUILD PAC

Mailing Address 1201 15th St., NW

City Washington State DC Zip Code 20005-2800

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 8 / 2 0 / 2 0 0 8

**Transaction ID:** 80824.C2387

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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 21 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
Natl Assn. For Uniformed Service PAC

Mailing Address 5535 Hempstead Way

City Springfield State VA Zip Code 22151

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID: 80824.C2390**  
 Amount of Each Receipt this Period 1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Natl Assoc. of Postal Supervisors PAC

Mailing Address 1727 King Street, Suite 400  
Attn: Mr. Ted Keating

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00092957

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID: 80824.C2388**  
 Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Natl Beer Wholesalers Assoc. PAC

Mailing Address 1101 King St., Ste. 600

City Alexandria State VA Zip Code 22314-4494

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID: 80824.C2379**  
 Amount of Each Receipt this Period 4000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

**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 / 38

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
Committee to Elect McHugh

**A.**

Full Name (Last, First, Middle Initial)  
Natl Concrete Masonry Assn PAC

Mailing Address 13750 Sunrise Valley Dr

City State Zip Code  
Herndon VA 20171-4662

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2008

Transaction ID: 80824.C2347

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
National Active & Retired Federal

Mailing Address Employees Association PAC  
606 N. Washington St.

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 15 / 2008

Transaction ID: 80824.C2364

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
NCR Corporation PAC

Mailing Address 616 H St NW Ste 5B

City State Zip Code  
Washington DC 20001-3732

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2008

Transaction ID: 80824.C2345

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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: PAGE 23 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

**A.** Full Name (Last, First, Middle Initial)  
NORPAC

Mailing Address PO Box 5595

City Englewood State NJ Zip Code 07631-5595

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID:** 80824.C2391  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Pitney Bowes Inc. PAC

Mailing Address 2151 Jamieson Ave., #1601

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt 07 / 18 / 2008  
**Transaction ID:** 80824.C2348  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Time Warner Cable PAC

Mailing Address 800 Connecticut Avenue, NW Suite 200

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00339291

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 20 / 2008  
**Transaction ID:** 80824.C2392  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**TOTAL** This Period (last page this line number only) ..... ► 33000.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 38  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

A.

Full Name (Last, First, Middle Initial)  
Franklin County Republican Cmte.

Mailing Address 58 Broad Street

City State Zip Code  
Tupper Lake NY 12986

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2008

Transaction ID: 80824.C2342

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00



# 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)

<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)  
Committee to Elect McHugh

A.

Full Name (Last, First, Middle Initial)  
3Dog Consulting Ltd.

Transaction ID: 80824.E1580  
Date of Disbursement

Mailing Address 104 Hume Avenue

MM / DD / YYYY  
07 / 19 / 2008

City State Zip Code  
Alexandria VA 22301-

Amount of Each Disbursement this Period

7662.24

Purpose of Disbursement  
Fundraising Consulting

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FUNDRAISING CONSULTING

B.

Full Name (Last, First, Middle Initial)  
3Dog Consulting Ltd.

Transaction ID: 80824.E1588  
Date of Disbursement

Mailing Address 104 Hume Avenue

MM / DD / YYYY  
07 / 31 / 2008

City State Zip Code  
Alexandria VA 22301-

Amount of Each Disbursement this Period

8971.60

Purpose of Disbursement  
Fundraising Consulting

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FUNDRAISING CONSULTING

C.

Full Name (Last, First, Middle Initial)  
Jeff Buley, Esq.

Transaction ID: 80824.E1589  
Date of Disbursement

Mailing Address Buley Public Affairs  
27 Elk St.

MM / DD / YYYY  
08 / 01 / 2008

City State Zip Code  
Albany NY 12207-

Amount of Each Disbursement this Period

3600.00

Purpose of Disbursement  
Legal Fee

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

LEGAL FEE

SUBTOTAL of Disbursements This Page (optional) .....

20233.84

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)  
Committee to Elect McHugh

A.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: 80824.E1578 Date of Disbursement 07 / 19 / 2008
	Mailing Address 300 First Street, SE	Amount of Each Disbursement this Period 35.70
	City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Meeting Expense Candidate Name	001 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) ▼
		MEETING EXPENSE

B.	Full Name (Last, First, Middle Initial) Executive Impressions	Transaction ID: 80824.E1590 Date of Disbursement 08 / 18 / 2008
	Mailing Address 7713 Eagles Head Court	Amount of Each Disbursement this Period 786.57
	City Derwood State MD Zip Code 20855-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Pencils/Signage Candidate Name	006 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) ▼
		CAMPAIGN PENCILS/SIGNAGE

C.	Full Name (Last, First, Middle Initial) Grays Flower Shop	Transaction ID: 80824.E1582 Date of Disbursement 07 / 19 / 2008
	Mailing Address 1605 State Street	Amount of Each Disbursement this Period 116.37
	City Watertown State NY Zip Code 13601-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers Candidate Name	001 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) ▼
		FLOWERS

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	938.64
<b>TOTAL</b> 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)  
Committee to Elect McHugh

A.

Full Name (Last, First, Middle Initial)  
Huckaby-Davis-Lisker

Transaction ID: 80824.E1546  
Date of Disbursement

Mailing Address 228 South Washington Street  
Suite 115

/   /

City Washington State DC Zip Code 22314-

Amount of Each Disbursement this Period

Purpose of Disbursement Accounting/Compliance  
Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

ACCOUNTING/COMPLIANCE

B.

Full Name (Last, First, Middle Initial)  
Italian American Festival

Transaction ID: 80824.E1592  
Date of Disbursement

Mailing Address 192 Bellew Ave S # 6177

/   /

City Watertown State NY Zip Code 13601-2348

Amount of Each Disbursement this Period

Purpose of Disbursement Program Advertising  
Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

PROGRAM ADVERTISING

C.

Full Name (Last, First, Middle Initial)  
Jolly Good Promotional Products

Transaction ID: 80824.E1585  
Date of Disbursement

Mailing Address 17 Bracken Road

/   /

City Morrisonville State NY Zip Code 12962-

Amount of Each Disbursement this Period

Purpose of Disbursement Car Stickers  
Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

CAR STICKERS

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)

<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)  
Committee to Elect McHugh

<p><b>A.</b> Full Name (Last, First, Middle Initial) Key Bank of Watertown</p> <p>Mailing Address 200 Washington Street</p> <p>City Watertown State NY Zip Code 13601-</p> <p>Purpose of Disbursement Bank Fee</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><b>Transaction ID:</b> 80824.E1602</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.45"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>BANK FEE</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Key Bank Credit Card</p> <p>Mailing Address PO Box 9004</p> <p>City Des Moines State IA Zip Code 50368-</p> <p>Purpose of Disbursement See Below</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><b>Transaction ID:</b> 80824.E1547</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4150.70"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SEE BELOW</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address Washington, DC 20005 c/o PO Box 9004</p> <p>City Des Moines State IA Zip Code 50368-</p> <p>Purpose of Disbursement Train Fare</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><b>Transaction ID:</b> 80824.E1566</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> <b>MEMO: TRAIN FARE</b></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)

<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)  
Committee to Elect McHugh

<b>A.</b> Full Name (Last, First, Middle Initial) Best Western Carriage House Inn Mailing Address 300 Washington Street City Watertown State NY Zip Code 13601- Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 80824.E1552 Date of Disbursement 07 / 19 / 2008
	Amount of Each Disbursement this Period 517.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: LODGING

<b>B.</b> Full Name (Last, First, Middle Initial) Econo Lodges Mailing Address 70 East 1st Street City Oswego State NY Zip Code 13126- Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 80824.E1553 Date of Disbursement 07 / 19 / 2008
	Amount of Each Disbursement this Period 233.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: LODGING

<b>C.</b> Full Name (Last, First, Middle Initial) Exxonmobil Mailing Address 11808 Baron Cameron Avenue City Reston State VA Zip Code 20190- Purpose of Disbursement Fuel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 80824.E1560 Date of Disbursement 07 / 19 / 2008
	Amount of Each Disbursement this Period 200.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: FUEL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# 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)

<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)  
Committee to Elect McHugh

A.	Full Name (Last, First, Middle Initial) GS Steamers Bar & Grill	Transaction ID: 80824.E1558 Date of Disbursement 07 / 19 / 2008
	Mailing Address 70 East First Street	Amount of Each Disbursement this Period 140.03
	City Oswego State NY Zip Code 13126-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food Candidate Name	<b>[MEMO ITEM]</b> MEMO: FOOD
	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) Micks Place	Transaction ID: 80824.E1571 Date of Disbursement 07 / 19 / 2008
	Mailing Address 204 Factory Street	Amount of Each Disbursement this Period 311.75
	City Watertown State NY Zip Code 13601-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Event Catering Candidate Name	<b>[MEMO ITEM]</b> MEMO: EVENT CATERING
	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) National Car Rental	Transaction ID: 80824.E1574 Date of Disbursement 07 / 19 / 2008
	Mailing Address 6929 N Lakewood Ave	Amount of Each Disbursement this Period 477.90
	City Tulsa State OK Zip Code 74117-1808	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Car Rental Candidate Name	<b>[MEMO ITEM]</b> MEMO: CAR RENTAL
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)  
Committee to Elect McHugh

A.	Full Name (Last, First, Middle Initial) Riveridge Resort	Transaction ID: 80824.E1575 Date of Disbursement 07 / 19 / 2008
	Mailing Address 17 Holland Street	Amount of Each Disbursement this Period 224.39
	City Alexandria Bay State NY Zip Code 13607-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Lodging Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: LODGING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 80824.E1567 Date of Disbursement 07 / 19 / 2008
	Mailing Address c/o PO Box 53132	Amount of Each Disbursement this Period 17.23
	City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Stewarts Shop	Transaction ID: 80824.E1555 Date of Disbursement 07 / 19 / 2008
	Mailing Address 229 N Massey St	Amount of Each Disbursement this Period 192.18
	City Watertown State NY Zip Code 13601-2403	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fuel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FUEL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)  
Committee to Elect McHugh

A.

Full Name (Last, First, Middle Initial)  
Sunoco Gas

Mailing Address c/o PO Box 9004

City State Zip Code  
Des Moines IA 50368-

Purpose of Disbursement  
Fuel

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80824.E1548  
Date of Disbursement

07 / 19 / 2008

Amount of Each Disbursement this Period

83.92

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]  
MEMO: FUEL

B.

Full Name (Last, First, Middle Initial)  
US Airways

Mailing Address PO Box 307

City State Zip Code  
Pittsburgh PA 15230-

Purpose of Disbursement  
Air Fare

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80824.E1565  
Date of Disbursement

07 / 19 / 2008

Amount of Each Disbursement this Period

438.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]  
MEMO: AIR FARE

C.

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address P.O. Box 17646

City State Zip Code  
Baltimore MD 21297-

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80824.E1561  
Date of Disbursement

07 / 19 / 2008

Amount of Each Disbursement this Period

253.72

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]  
MEMO: TELEPHONE

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)  
Committee to Elect McHugh

A.	Full Name (Last, First, Middle Initial) John McHugh	Transaction ID: 80824.E1600 Date of Disbursement 08 / 15 / 2008
	Mailing Address 15538 NYS Route 193	Amount of Each Disbursement this Period 20.00
	City Pierrepont Manor State NY Zip Code 13674-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Candidate Name	002 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) ▼
		TRAVEL

B.	Full Name (Last, First, Middle Initial) Oswego County Weeklies	Transaction ID: 80824.E1581 Date of Disbursement 07 / 19 / 2008
	Mailing Address P.O. Box 129	Amount of Each Disbursement this Period 227.25
	City Mexico State NY Zip Code 13114-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Subscription Candidate Name	001 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) ▼
		SUBSCRIPTION

C.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: 80824.E1603 Date of Disbursement 07 / 21 / 2008
	Mailing Address 5821 Crossroads Center	Amount of Each Disbursement this Period 7.65
	City Falls Church State VA Zip Code 22041-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Fee Candidate Name	001 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) ▼
		BANK FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	254.90
<b>TOTAL</b> 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)  
Committee to Elect McHugh

A.

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address P.O. Box 17646

City Baltimore State MD Zip Code 21297-

Purpose of Disbursement Telephone

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80824.E1579  
Date of Disbursement

07 / 19 / 2008

Amount of Each Disbursement this Period

109.07

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

B.

Full Name (Last, First, Middle Initial)  
Kate Wehrle

Mailing Address 152 Ward Street

City Watertown State NY Zip Code 13601-4616

Purpose of Disbursement Mileage

Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80824.E1545  
Date of Disbursement

07 / 19 / 2008

Amount of Each Disbursement this Period

38.38

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

MILEAGE

SUBTOTAL of Disbursements This Page (optional) .....

147.45

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

27917.39

# 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 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

<b>A.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Bobby Cantwell <hr/> Mailing Address 120 Washington St <hr/> City Watertown State NY Zip Code 13601-3330 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80714.E1541 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Graham for Mayor <hr/> Mailing Address 303 Winslow St., Upper Apt. <hr/> City Watertown State NY Zip Code 13601- <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80824.E1597 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Independence Party of New York <hr/> Mailing Address PO Box 871 <hr/> City Lindenhurst State NY Zip Code 11757-0871 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80824.E1595 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

<b>A.</b> Full Name (Last, First, Middle Initial) Independence Party of Oneida County Mailing Address PO Box 48 City Utica State NY Zip Code 13503-0048 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80824.E1593 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>B.</b> Full Name (Last, First, Middle Initial) Independence Party of Madison County Mailing Address 1624 W Elm St City Oneida State NY Zip Code 13421-3011 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80824.E1594 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>C.</b> Full Name (Last, First, Middle Initial) Independence Party of Lewis County Mailing Address PO Box 73 City Constableville State NY Zip Code 13325-0073 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80824.E1596 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

<b>A.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Cmte. <hr/> Mailing Address 320 First St., SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement Transfer of Surplus Funds Candidate Name	Transaction ID: 80824.E1591 Date of Disbursement 07 / 28 / 2008 <hr/> Amount of Each Disbursement this Period 100000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>B.</b> Full Name (Last, First, Middle Initial) People for English <hr/> Mailing Address P.O. Box 1940 <hr/> City Erie State PA Zip Code 16507- <hr/> Purpose of Disbursement Contribution Candidate Name	Transaction ID: 80824.E1543 Date of Disbursement 07 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>C.</b> Full Name (Last, First, Middle Initial) Shelley Moore Capito for Congress <hr/> Mailing Address P.O. Box 11579 <hr/> City Charleston State WV Zip Code 25339- <hr/> Purpose of Disbursement Contribution Candidate Name	Transaction ID: 80824.E1544 Date of Disbursement 07 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>101500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>105000.00</b>

**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 38 / 38

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

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NAME OF COMMITTEE (In Full)  
Committee to Elect McHugh

A.

Full Name (Last, First, Middle Initial)  
Natl League Of Postmasters PAC

Mailing Address 5904 Richmond Hwy Ste 500

City Alexandria State VA Zip Code 22303-1864

Purpose of Disbursement  
Refund of Contribution 010 Refund of Con

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

010  
Category/  
Type

Transaction ID: 80824.E1584

Date of Disbursement

07 / 19 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

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

1000.00