

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) Friends of Maurice Hinchey

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

[Empty box]

ADDRESS (number and street) PO Box 4497
Check if different than previously reported. (ACC) Kingston NY 12402

2. FEC IDENTIFICATION NUMBER C00272633
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT NY 22

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
X 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 08 21 2008 through 09 30 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 Susanne Herl

Signature of Treasurer Electronically Filed by Susanne Herl Date 10 15 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

Friends of Maurice Hinchey

Report Covering the Period:

From: 

M	M
0	8

D	D
2	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	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)).....	70722.20	618750.94
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	70722.20	617450.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	36555.26	354686.34
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	413.99
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	36555.26	354272.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	223741.40	
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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Friends of Maurice Hinchey

Report Covering the Period: From: 

M	M
0	8

D	D
2	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	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

(i) Itemized (use Schedule A).....

33220.20

259562.84

(ii) Unitemized.....

13102.00

131118.10

(iii) TOTAL of contributions

46322.20

390680.94

from individuals..... ▶

5000.00

5000.00

(b) Political Party Committees.....

19400.00

223070.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

70722.20

618750.94

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

413.99

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

299.14

1486.16

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

71021.34

620651.09

**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.....	36555.26	354686.34
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	26300.00	97900.00
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).....	0.00	1300.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1300.00
21. OTHER DISBURSEMENTS.....	2050.00	53226.40
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	64905.26	507112.74

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	217625.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	71021.34
25. SUBTOTAL (add Line 23 and Line 24).....	288646.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	64905.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	223741.40

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 63  
(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial) John F Abel		Date of Receipt MM / DD / YYYY 09 / 29 / 2008
Mailing Address 1001 Taughannock Boulevard		<b>Transaction ID:</b> C32555
City Ithaca	State NY	Zip Code 14850-9572
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Not Employed	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 950.00	

**B.**

Full Name (Last, First, Middle Initial) William D Abramson		Date of Receipt MM / DD / YYYY 09 / 14 / 2008
Mailing Address Muddy Brook Road		<b>Transaction ID:</b> C32502
City Phoenicia	State NY	Zip Code 12464
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Buchbinder Warren	Occupation Director of Sales	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Arthur A Anderson		Date of Receipt MM / DD / YYYY 09 / 30 / 2008
Mailing Address 302 Moonhaw Road		<b>Transaction ID:</b> C32567
City West Shokan	State NY	Zip Code 12494
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Morgan Anderson	Occupation Executive	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1450.00
<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 6 / 63

(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
Elliott G Auerbach

Mailing Address 5 Glenwood Drive

City State Zip Code  
Ellenville NY 12428

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Town of Ellenville Administrator

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
09 / 09 / 2008

**Transaction ID:** C32388

Amount of Each Receipt this Period  
150.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Rose Bethe

Mailing Address 324 Savage Farm Dr.

City State Zip Code  
Ithaca NY 14850-6503

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Not Employed Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
09 / 02 / 2008

**Transaction ID:** C32313

Amount of Each Receipt this Period  
150.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Stephen Bloom

Mailing Address 157 Westview Lane

City State Zip Code  
Ithaca NY 14850

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Cornell University Professor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
09 / 02 / 2008

**Transaction ID:** C32328

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 400.00

**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 / 63
	<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)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) James Jay Bodrato	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 330 Meadow Avenue	<b>Transaction ID:</b> C32528
	City State Zip Code Newburgh NY 12550	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Construction Contractors Assoc.	Occupation Business Manager	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Julia A Bronson	Date of Receipt MM / DD / YYYY 09 / 09 / 2008
	Mailing Address 2517 Lucas Turnpike	<b>Transaction ID:</b> C32389
	City State Zip Code High Falls NY 12440	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Not Employed	Occupation Homemaker	
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) Mark Buller	Date of Receipt MM / DD / YYYY 09 / 14 / 2008
	Mailing Address 885 Conklin Street	<b>Transaction ID:</b> C32503
	City State Zip Code Farmingdale NY 11735	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Margam	Occupation Owner	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1750.00</b>
<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 8 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Beatrice Capen  
Mailing Address PO Box 400  
City State Zip Code  
Stone Ridge NY 12484  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
UCCC Professor  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00  
Date of Receipt M M / D D / Y Y Y Y  
0 9 / 1 2 / 2 0 0 8  
Transaction ID: C32471  
Amount of Each Receipt this Period  
100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Charles P Cara  
Mailing Address 229 Greene Avenue  
City State Zip Code  
Brooklyn NY 11238  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Self Real Estate  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt M M / D D / Y Y Y Y  
0 9 / 1 4 / 2 0 0 8  
Transaction ID: C32504  
Amount of Each Receipt this Period  
1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Vivian Carlip  
Mailing Address 408 Harvard St.  
City State Zip Code  
Vestal NY 13850  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Not Employed Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00  
Date of Receipt M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 0 8  
Transaction ID: C32558  
Amount of Each Receipt this Period  
100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1200.00  
**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 / 63
	<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)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) Caryn Carter	Date of Receipt MM / DD / YYYY 09 / 18 / 2008
	Mailing Address 427 Upper Samsonville Road	<b>Transaction ID:</b> C32496
	City State Zip Code Olivebridge NY 12461	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Mercury Group Public Relations	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Theodore Chase	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 159 Old Georgetown Rd.	<b>Transaction ID:</b> C32568
	City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Not Employed Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Dale C Christensen, Jr.	Date of Receipt MM / DD / YYYY 09 / 14 / 2008
	Mailing Address 50 Sutton Place South 6G	<b>Transaction ID:</b> C32505
	City State Zip Code New York NY 10022	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3050.00
<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 10 / 63

(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
Ruth Covelli

Mailing Address 163 Krager Road

City State Zip Code  
Binghamton NY 13904

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

600.00

Date of Receipt MM / DD / YYYY  
09 / 14 / 2008

**Transaction ID:** C32480

Amount of Each Receipt this Period 100.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Jonathan Culler

Mailing Address 909 Wyckoff Road

City State Zip Code  
Ithaca NY 14850

FEC ID number of contributing federal political committee. C

Name of Employer Cornell University Occupation Professor

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

500.00

Date of Receipt MM / DD / YYYY  
09 / 04 / 2008

**Transaction ID:** C32421

Amount of Each Receipt this Period 200.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Ken Deschere

Mailing Address 202 South Hill Terrace

City State Zip Code  
Ithaca NY 14850

FEC ID number of contributing federal political committee. C

Name of Employer IEES Occupation Computer System Manager

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

475.00

Date of Receipt MM / DD / YYYY  
09 / 29 / 2008

**Transaction ID:** C32559

Amount of Each Receipt this Period 75.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 375.00

**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 (check only one) <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 11 / 63
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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) Carol Devine	Date of Receipt MM / DD / YYYY 09 / 02 / 2008
	Mailing Address 201 DeWitt Place	<b>Transaction ID:</b> C32314
	City State Zip Code Ithaca NY 14850	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Cornell University Professor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bill Downing	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 215 North Cayuga St.	<b>Transaction ID:</b> C32462
	City State Zip Code Ithaca NY 14850	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Architect	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kim Elliman	Date of Receipt MM / DD / YYYY 09 / 09 / 2008
	Mailing Address 555 Park Avenue	<b>Transaction ID:</b> C32359
	City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Gray, Seifert & Co. Finance	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>650.00</b>
<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 12 / 63
	<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)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) Samuel Eskenazi	Date of Receipt MM / DD / YYYY 09 / 14 / 2008
	Mailing Address 750 Columbus Avenue	<b>Transaction ID:</b> C32497
	City State Zip Code New York NY 10025	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Not Employed Occupation Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2750.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Garabed Fattal	Date of Receipt MM / DD / YYYY 09 / 09 / 2008
	Mailing Address 3 Moran Ct.	<b>Transaction ID:</b> C32360
	City State Zip Code Binghamton NY 13903	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Not Employed Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 650.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Martha Ferger	Date of Receipt MM / DD / YYYY 09 / 09 / 2008
	Mailing Address P.O. Box 8	<b>Transaction ID:</b> C32413
	City State Zip Code Dryden NY 13053	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Not Employed Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1300.00</b>
<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 13 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

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

Mailing Address 210 Palentown Road

City Kerhonkson State NY Zip Code 12446

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

Name of Employer Self Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 415.00

Date of Receipt 09 / 09 / 2008  
**Transaction ID: C32393**  
 Amount of Each Receipt this Period 75.00

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

**B.** Full Name (Last, First, Middle Initial)  
Marc S Gerstman, Esq

Mailing Address 313 Hamilton Street

City Albany State NY Zip Code 12210

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

Name of Employer Self Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt 09 / 29 / 2008  
**Transaction ID: C32574**  
 Amount of Each Receipt this Period 200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Lynn Gitter

Mailing Address 343 Lost Clove Road

City Big Indian State NY Zip Code 12410

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

Name of Employer Kaatskill Kaleidoscope Ventures Occupation Managing Member

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 14 / 2008  
**Transaction ID: C32506**  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1275.00**

**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 / 63

(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
Marti Green

Mailing Address 129 Hovi Lane

City State Zip Code  
Kingston NY 12401

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

Name of Employer Occupation  
Not employed Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 07 / 2008

Transaction ID: C32395

Amount of Each Receipt this Period

500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Patricia B Greenwald

Mailing Address 875 Park Avenue

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Not Employed Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2008

Transaction ID: C32498

Amount of Each Receipt this Period

1000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Margaret M Hammond

Mailing Address 510 Turner Place

City State Zip Code  
Ithaca NY 14850

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

Name of Employer Occupation  
Self Nurse

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2008

Transaction ID: C32448

Amount of Each Receipt this Period

150.00

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

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

1650.00

**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 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Connie Harvey  
Mailing Address 421D A.A.B.C.  
City Aspen State CO Zip Code 81611-3551  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Rancher  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼ 900.00  
Date of Receipt 09 / 09 / 2008  
Transaction ID: C32363  
Amount of Each Receipt this Period 100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Hoover  
Mailing Address 4290 Atwood Rd.  
City Stone Ridge State NY Zip Code 12484  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼ 300.00  
Date of Receipt 09 / 02 / 2008  
Transaction ID: C32348  
Amount of Each Receipt this Period 150.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Hoover  
Mailing Address 4290 Atwood Rd.  
City Stone Ridge State NY Zip Code 12484  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼ 300.00  
Date of Receipt 09 / 30 / 2008  
Transaction ID: C32565  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 300.00  
**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 16 / 63
	<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)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) Mescal Hornbeck		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 62 Ohayo Mountain Road		<b>Transaction ID:</b> C32349
	City Woodstock	State NY	Zip Code 12498
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer: Not Employed Occupation: Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 350.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Jane Hsu		Date of Receipt MM / DD / YYYY 09 / 14 / 2008
	Mailing Address 2312 Hemlock Lane		<b>Transaction ID:</b> C32485
	City Vestal	State NY	Zip Code 13850
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
	Name of Employer: Cornell University Occupation: Lab Technician Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1090.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Andre Jagendorf		Date of Receipt MM / DD / YYYY 09 / 02 / 2008
	Mailing Address 455 Savage Farm Drive		<b>Transaction ID:</b> C32336
	City Ithaca	State NY	Zip Code 14850
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer: Not Employed Occupation: Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 700.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	240.00
<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 17 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Andre Jagendorf  
Mailing Address 455 Savage Farm Drive  
City Ithaca State NY Zip Code 14850  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼ 700.00  
Date of Receipt 09 / 09 / 2008  
Transaction ID: C32381  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mary Johnston  
Mailing Address 45 Hornbeck Lane  
City Accord State NY Zip Code 12404  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼ 800.00  
Date of Receipt 09 / 02 / 2008  
Transaction ID: C32305  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Matthew Kambrod  
Mailing Address 915 Oyster Cove Drive  
City Grasonville State MD Zip Code 21638  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Link Simulation Occupation Lobbyist  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼ 2500.00  
Date of Receipt 09 / 24 / 2008  
Transaction ID: C32593  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 600.00  
**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 18 / 63
	<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)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) Sylvia Kerber	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 103 Court Street	<b>Transaction ID:</b> C32519
	City Binghamton State NY Zip Code 13901	Amount of Each Receipt this Period 2230.20
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Upstate Office Furniture Occupation Owner Receipt For: 2008 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2230.20	* In-Kind: Office Furniture

<b>B.</b>	Full Name (Last, First, Middle Initial) Naima E Kradjian	Date of Receipt MM / DD / YYYY 09 / 02 / 2008
	Mailing Address 53 Schiller Street	<b>Transaction ID:</b> C32338
	City Binghamton State NY Zip Code 13905	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer First Night International Occupation CEO Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1100.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bonnie Landi	Date of Receipt MM / DD / YYYY 09 / 09 / 2008
	Mailing Address 20 Arlmont Street	<b>Transaction ID:</b> C32382
	City Kingston State NY Zip Code 12401	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Ulster YouthBuild Partnership Occupation Program Director Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2530.20</b>
<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 19 / 63
	<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)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher R Larsen		Date of Receipt
	Mailing Address 44 Crystal Farm Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 14 / 2008
	City	State	Zip Code
	Warwick	NY	10990
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32507
Name of Employer Halmar International		Occupation Owner	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert J Levinsohn		Date of Receipt
	Mailing Address 130 East 67th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 14 / 2008
	City	State	Zip Code
	New York	NY	10021
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32499
Name of Employer Proskaver Rose LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) John Macauley		Date of Receipt
	Mailing Address 17 Poplar Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 02 / 2008
	City	State	Zip Code
	Kingston	NY	12401
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32306
Name of Employer Not Employed		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 50.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1300.00
<b>TOTAL</b> 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 20 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Stephen MacDonald  
Mailing Address P.O. Box 5  
City High Falls State NY Zip Code 12440  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼  
250.00  
Date of Receipt 09 / 09 / 2008  
Transaction ID: C32401  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Kathryn Madigan  
Mailing Address 7 West End Avenue  
City Binghamton State NY Zip Code 13905  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Levene Gouldin & Thompson LLP Occupation Attorney  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼  
300.00  
Date of Receipt 09 / 29 / 2008  
Transaction ID: C32563  
Amount of Each Receipt this Period 100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Kenneth McClane  
Mailing Address 114 Glenside Road  
City Ithaca State NY Zip Code 14850  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cornell University Occupation College Teacher  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼  
1400.00  
Date of Receipt 08 / 25 / 2008  
Transaction ID: C32284  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**  
**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 / 63  
(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)  
Friends of Maurice Hinchey

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

Mailing Address 870 United Nations Plaza

City State Zip Code  
New York NY 10017

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2008

**Transaction ID:** C32500

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Elizabeth McLafferty

Mailing Address 103 Needham Place

City State Zip Code  
Ithaca NY 14850

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2008

**Transaction ID:** C32461

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Ralph Moseley

Mailing Address 95 West 95th Street #31E

City State Zip Code  
New York NY 10025

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 09 / 2008

**Transaction ID:** C32463

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

**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 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

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

Mailing Address 29 Maddaloni Road

City State Zip Code  
Hurley NY 12443

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

Name of Employer Self Occupation  
Self Writer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
300.00

Transaction ID: C32385

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

**B.** Full Name (Last, First, Middle Initial)  
Lisa Beth Older

Mailing Address 1228 Route 212

City State Zip Code  
Saugerties NY 12477

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

Name of Employer Self Occupation  
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
1000.00

Transaction ID: C32191

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

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

Mailing Address 1228 Route 212

City State Zip Code  
Saugerties NY 12477

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

Name of Employer Self Occupation  
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
1000.00

Transaction ID: C32517

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2300.00**

**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 / 63
	<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)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) Lisa Beth Older		Date of Receipt
	Mailing Address 1228 Route 212		<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 09 / 29 / 2008
	City	State	Zip Code
	Saugerties	NY	12477
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32572
Name of Employer Self		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 2200.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Adelaide Park Gomer		Date of Receipt
	Mailing Address 513 Wyckoff 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 09 / 05 / 2008
	City	State	Zip Code
	Ithaca	NY	14850
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32299
Name of Employer Park Foundation		Occupation Program Officer	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
		<input type="text"/> 4600.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mario Picayo		Date of Receipt
	Mailing Address 109 Echo Hill 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 09 / 09 / 2008
	City	State	Zip Code
	Saugerties	NY	12477
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32403
Name of Employer Self		Occupation Publisher	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 150.00
		<input type="text"/> 400.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2550.00
<b>TOTAL</b> 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 24 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Steven G Poskanzer

Mailing Address 29 Cedar Ridge Road

City State Zip Code  
New Paltz NY 12561

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

Name of Employer State of New York Occupation College President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: C32587

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

**B.** Full Name (Last, First, Middle Initial)  
Julie Ratner

Mailing Address 9SE1Y Brook to Hands Creek Road

City State Zip Code  
East Hampton NY 11937

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

Name of Employer Self Occupation Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: C32501

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

**C.** Full Name (Last, First, Middle Initial)  
Michael D Ratner

Mailing Address 124 Washington Place

City State Zip Code  
New York NY 10014

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

Name of Employer Self Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: C32508

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 25 / 63
	<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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial) Judith Rhulen		Date of Receipt MM / DD / YYYY 09 / 09 / 2008
Mailing Address 471 Starlight Road		<b>Transaction ID:</b> C32354
City Monticello	State NY	Zip Code 12701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Not Employed	Occupation Retired	<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.**

Full Name (Last, First, Middle Initial) Randy Rissman		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 132 Cannon Circle		<b>Transaction ID:</b> C32545
City Woodstock	State NY	Zip Code 12498
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Maverick Family Counseling	Occupation Social Worker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Robert Roth		Date of Receipt MM / DD / YYYY 09 / 02 / 2008
Mailing Address 31 South Road		<b>Transaction ID:</b> C32307
City Kingston	State NY	Zip Code 12401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Institute for Family Health	Occupation Physician	<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>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<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 26 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

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

Mailing Address 2612 Hurley Mountain Road

City State Zip Code  
Kingston NY 12401

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

Name of Employer Self Occupation  
Public Relations

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	8

**Transaction ID:** C32404

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Anthony Salerno

Mailing Address 441 River Road

City State Zip Code  
Newburgh NY 12550

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

Name of Employer Healthcare Associates Occupation  
CEO

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	9	/	1	2	/	2	0	0	8

**Transaction ID:** C32512

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Peter Saltonstall

Mailing Address King Ferry Winery  
658 Lake Road

City State Zip Code  
King Ferry NY 13081

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

Name of Employer Self Occupation  
Vintner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	2	/	2	0	0	8

**Transaction ID:** C32351

Amount of Each Receipt this Period  
400.00

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

\* In-Kind: Wine

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

**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 / 63

(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
John C Semmler

Mailing Address 630 Mt Pleasant Road

City State Zip Code  
Freeville NY 13068

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Univ of Sydney USA Fdn Secretary

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

450.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 04 / 2008

**Transaction ID:** C32434

Amount of Each Receipt this Period  
100.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Michael Sheran

Mailing Address 3 Mary Davis Road

City State Zip Code  
Accord NY 12404

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Physician

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

550.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 07 / 2008

**Transaction ID:** C32409

Amount of Each Receipt this Period  
400.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Iris Shokoff

Mailing Address 200 East 57th Street Apt 6K

City State Zip Code  
New York NY 10022

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Advertising

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 14 / 2008

**Transaction ID:** C32509

Amount of Each Receipt this Period  
500.00

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 28 / 63  
(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
Don Simkin

Mailing Address PO Box 1400

City State Zip Code  
Livingston Manor NY 12758

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

Name of Employer Self Occupation Dentist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

**Transaction ID: C32544**

Amount of Each Receipt this Period  
100.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Michael Skarzynski

Mailing Address 2 Ely Park Boulevard Apt 4

City State Zip Code  
Binghamton NY 13905

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 515.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

**Transaction ID: C32468**

Amount of Each Receipt this Period  
45.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Barry Skeist

Mailing Address 738 Douglas Drive

City State Zip Code  
Waverly NY 14892

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

Name of Employer Guthrie Clinic Occupation Radiologist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

**Transaction ID: C32458**

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **245.00**

**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 / 63
	<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)  
Friends of Maurice Hinchey

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles B Slutzky		Date of Receipt
	Mailing Address Route 297, Box 396		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 14 / 2008
	City	State	Zip Code
	Hunter	NY	12442
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32510
Name of Employer I&OA Slutzky Inc		Occupation General Contractor	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Gerald Sonnenfeld		Date of Receipt
	Mailing Address 13 Pine Meadow Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 25 / 2008
	City	State	Zip Code
	Vestal	NY	13850
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32291
Name of Employer Binghamton University		Occupation VP for Research	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 345.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Gerald Sonnenfeld		Date of Receipt
	Mailing Address 13 Pine Meadow Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 08 / 2008
	City	State	Zip Code
	Vestal	NY	13850
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C32469
Name of Employer Binghamton University		Occupation VP for Research	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 45.00
		<input type="text"/> 345.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1070.00
<b>TOTAL</b> 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 30 / 63  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

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

Mailing Address Halcyon Park  
26 Parkside Dr.

City State Zip Code  
Lake Katrine NY 12449

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
MHVFCU President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 2 3 / 2 0 0 8

**Transaction ID:** C32187

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
William J Tastle

Mailing Address 1269 Domenica Drive

City State Zip Code  
Endicott NY 13760

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Ithaca College Professor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 4 / 2 0 0 8

**Transaction ID:** C32491

Amount of Each Receipt this Period  
90.00

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

**C.** Full Name (Last, First, Middle Initial)  
Annette Testani

Mailing Address 19 Carhart Ave.

City State Zip Code  
Johnson City NY 13790

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NYS Dept of Motor Vehicles Clerk

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 295.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 4 / 2 0 0 8

**Transaction ID:** C32492

Amount of Each Receipt this Period  
45.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 235.00

**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 / 63  
(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
Nancy C Tigner

Mailing Address 103 Campbell Ave

City Ithaca State NY Zip Code 14850-2057

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2008

Transaction ID: C32293

Amount of Each Receipt this Period 400.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Nancy C Tigner

Mailing Address 103 Campbell Ave

City Ithaca State NY Zip Code 14850-2057

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C32591

Amount of Each Receipt this Period 100.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Marguerite Uphoff

Mailing Address 16 Cedar Lane

City Ithaca State NY Zip Code 14850

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

Name of Employer Self Occupation Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2008

Transaction ID: C32459

Amount of Each Receipt this Period 250.00

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

**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 32 / 63  
(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
Melva Wade

Mailing Address 45 Hornbeck Lane

City State Zip Code  
Accord NY 12404

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1150.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 02 / 2008

**Transaction ID:** C32308

Amount of Each Receipt this Period  
50.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Martha Wright

Mailing Address 114 E. Court Street

City State Zip Code  
Ithaca NY 14850

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C32579

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Izzy Yanay

Mailing Address HVFG LLC  
80 Brooks Road

City State Zip Code  
Ferndale NY 12734

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

Name of Employer Self Occupation Farmer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2850.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 14 / 2008

**Transaction ID:** C32511

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

**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 / 63  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

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

Mailing Address 111 Northview Rd.

City State Zip Code  
Ithaca NY 14850

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 09 / 2008

Transaction ID: C32378

Amount of Each Receipt this Period  
150.00

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

**B.** Full Name (Last, First, Middle Initial)  
Jane Pedersen

Mailing Address 145 Cascadilla Park Dr

City State Zip Code  
Ithaca NY 14850-3804

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

Name of Employer Cornell University Occupation Administrator

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2008

Transaction ID: C32549

Amount of Each Receipt this Period  
250.00

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

\* Earmarked Contribution:  
See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation Conduit total: \$250.00

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2008

Transaction ID: C32549B

Amount of Each Receipt this Period  
250.00

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

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

**TOTAL** This Period (last page this line number only) ..... ▶ **33220.20**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 63  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)  
NYS Democratic Committee

Mailing Address 461 Park Avenue South

City	State	Zip Code
New York	NY	10016

FEC ID number of contributing federal political committee. **C** C00143230

Name of Employer	Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	0	8

Transaction ID: C32521

Amount of Each Receipt this Period  
 5000.00

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

\* In-Kind: Use of Voter File Data

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00

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

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

FOR LINE NUMBER: PAGE 35 / 63  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Agri-Mark LEC  
Mailing Address PO Box 5800  
City Lawrence State MA Zip Code 01842  
FEC ID number of contributing federal political committee. **C** C00141242  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00  
Date of Receipt 09 / 24 / 2008  
Transaction ID: C32596  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Dental Political Action Committee  
Mailing Address 1111 14th Street NW 11th Floor  
City Washington State DC Zip Code 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 ▼ 1000.00  
Date of Receipt 09 / 25 / 2008  
Transaction ID: C32553  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Federation of Teachers (COPE)  
Mailing Address 555 New Jersey Avenue, NW  
City Washington State DC Zip Code 20001-2079  
FEC ID number of contributing federal political committee. **C** C70002472  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00  
Date of Receipt 09 / 24 / 2008  
Transaction ID: C32597  
Amount of Each Receipt this Period 2000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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 / 63  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
BAE SYSTEMS USA PAC

Mailing Address 1300 North 17th Street Suite 1400

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 4 / 2 0 0 8

**Transaction ID:** C32598

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Barbara Lifton For State Assembly

Mailing Address PO Box 295

City State Zip Code  
Ithaca NY 14851

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 0 4 / 2 0 0 8

**Transaction ID:** C32415

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Cablevision Systems Corp PAC

Mailing Address 1111 Stewart Avenue

City State Zip Code  
Bethpage NY 11714

FEC ID number of contributing federal political committee. **C** C00197863

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  
 0 9 / 3 0 / 2 0 0 8

**Transaction ID:** C32594

Amount of Each Receipt this Period  
1500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2750.00**

**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 37 / 63  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Avenue NW  
South Building Ste 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 09 / 24 / 2008  
**Transaction ID: C32554**  
 Amount of Each Receipt this Period 2500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Friends of Mary Solomon

Mailing Address 12 Platt Street

City Poughkeepsie State NY Zip Code 12601

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 50.00

Date of Receipt 08 / 25 / 2008  
**Transaction ID: C32285**  
 Amount of Each Receipt this Period 50.00

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

**C.** Full Name (Last, First, Middle Initial)  
Int'l Bro. Of Electrical Workers-COPE

Mailing Address 900 Seventh Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5190.00

Date of Receipt 09 / 23 / 2008  
**Transaction ID: C32552**  
 Amount of Each Receipt this Period 90.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2640.00

**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 / 63  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Int'l Bro. Of Electrical Workers-COPE

Mailing Address 900 Seventh Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5190.00

Date of Receipt: 09 / 26 / 2008  
**Transaction ID: C32551**  
 Amount of Each Receipt this Period: 100.00

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

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

Mailing Address 1325 Massachusetts Avenue NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 08 / 25 / 2008  
**Transaction ID: C32234**  
 Amount of Each Receipt this Period: 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Road

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 09 / 24 / 2008  
**Transaction ID: C32595**  
 Amount of Each Receipt this Period: 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2100.00

**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 / 63

(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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
Nat'l Education Assoc PAC

Mailing Address 1201 16th Street NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2008

Transaction ID: C32412

Amount of Each Receipt this Period

3000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Nat'l Comm For An Effective Congress

Mailing Address 122 C Street, NW  
Suite 650

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00003558

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 27 / 2008

Transaction ID: C32297

Amount of Each Receipt this Period

2500.00

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

\* In-Kind: Precinct Targeting

**C.**

Full Name (Last, First, Middle Initial)  
Physical Therapy PAC

Mailing Address 1111 North Fairfax Street

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00012880

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  
09 / 29 / 2008

Transaction ID: C32599

Amount of Each Receipt this Period

1000.00

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

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

6500.00

**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 / 63  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

**A.** Full Name (Last, First, Middle Initial)  
Service Employees Int'l Union

Mailing Address COPE FUND PCC  
1800 Massachusetts Avenue NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6500.00

Date of Receipt: 08 / 26 / 2008  
**Transaction ID:** C32192  
 Amount of Each Receipt this Period: 1400.00

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

**B.** Full Name (Last, First, Middle Initial)  
Sierra Club PC

Mailing Address 408 C Street NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00135368

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 20.00

Date of Receipt: 09 / 11 / 2008  
**Transaction ID:** C32520  
 Amount of Each Receipt this Period: 10.00

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

\* In-Kind: Website Endorsement

**C.** Full Name (Last, First, Middle Initial)  
US Apple Association PAC

Mailing Address 8233 Old Courthouse Rd Ste 200

City Vienna State VA Zip Code 22182

FEC ID number of contributing federal political committee. **C** C00344945

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 24 / 2008  
**Transaction ID:** C32600  
 Amount of Each Receipt this Period: 500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1910.00

**TOTAL** This Period (last page this line number only) ..... ► 19400.00



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 41 / 63	
	(check only one)			
<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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial) Ulster Savings Bank		Date of Receipt
Mailing Address 280 Wall Street		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
City	State	Zip Code
Kingston	NY	12401
FEC ID number of contributing federal political committee.		Transaction ID: C32635
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="299.14"/>
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="1486.16"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="299.14"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="299.14"/>

**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)  
Friends of Maurice Hinchey

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T Business Service</p> <p>Mailing Address PO Box 371302</p> <p>City Pittsburgh State PA Zip Code 15250</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6661 <b>Date of Disbursement</b> 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 58.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bear Restaurant</p> <p>Mailing Address Route 212</p> <p>City Bearsville State NY Zip Code 12409</p> <p>Purpose of Disbursement Dinner Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6714 <b>Date of Disbursement</b> 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 103.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bear Restaurant</p> <p>Mailing Address Route 212</p> <p>City Bearsville State NY Zip Code 12409</p> <p>Purpose of Disbursement Dinner Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6713 <b>Date of Disbursement</b> 09 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 193.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

355.34

**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)  
Friends of Maurice Hinchey

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ber-Don Enterprises</p> <p>Mailing Address 551 Back Road</p> <p>City Gilboa State NY Zip Code 12076</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>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6731</p> <p>Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 650.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Campaign Finance Consultants</p> <p>Mailing Address 10 G Street NE Suite 470</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Campaign Consultant</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6674</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 4235.35</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catskill Art &amp; Office Supply</p> <p>Mailing Address 328 Wall Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Office Supplies</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6671</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 22.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

**4908.17**

**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)  
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Enterprise Car Rental	Transaction ID: D6741 Date of Disbursement 08 / 28 / 2008
	Mailing Address 126 State Route 28	Amount of Each Disbursement this Period 224.35
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Car Rental	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Liam Fitzsimmons	Transaction ID: D6702 Date of Disbursement 09 / 05 / 2008
	Mailing Address 1801 North Nelson Street	Amount of Each Disbursement this Period 575.02
	City Arlington State VA Zip Code 22207	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimburse Travel Expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Liam Fitzsimmons	Transaction ID: D6703 Date of Disbursement 09 / 16 / 2008
	Mailing Address 1801 North Nelson Street	Amount of Each Disbursement this Period 531.37
	City Arlington State VA Zip Code 22207	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimburse Travel Expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1330.74
<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)  
Friends of Maurice Hinchey

<p><b>A.</b> Full Name (Last, First, Middle Initial) Liam Fitzsimmons</p> <p>Mailing Address 1801 North Nelson Street</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement Salary</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6704</p> <p>Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1625.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Liam Fitzsimmons</p> <p>Mailing Address 1801 North Nelson Street</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement Salary</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6705</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 812.71</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FTD.Com</p> <p>Mailing Address 3113 Woodcreek Drive</p> <p>City Downers Grove State IL Zip Code 60515</p> <p>Purpose of Disbursement Flowers</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6690</p> <p>Date of Disbursement 09 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 149.96</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

2588.09

**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)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)  
Il Cena Colo

Mailing Address 50 Front Street

City Newburgh State NY Zip Code 12550

Purpose of Disbursement  
Dinner Expense

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6712  
Date of Disbursement

08 / 30 / 2008

Amount of Each Disbursement this Period

172.70

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

B.

Full Name (Last, First, Middle Initial)  
Jennifer Madden

Mailing Address 22 Burgevin Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement  
Office Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6657  
Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

285.00

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

C.

Full Name (Last, First, Middle Initial)  
Sylvia Kerber

Mailing Address 103 Court Street

City Binghamton State NY Zip Code 13901

Purpose of Disbursement  
Office Furniture

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6646  
Date of Disbursement

09 / 12 / 2008

Amount of Each Disbursement this Period

2230.20

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

\* in-kind received

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

2687.90

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)  
Friends of Maurice Hinchey

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) M&amp;T Bank</p> <p>Mailing Address 108 N Front Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Bank Service Charge</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6655</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 323.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) M&amp;T Bank</p> <p>Mailing Address 108 N Front Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Bank Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6656</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 248.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) MCI, Inc.</p> <p>Mailing Address 500 Second Ave. SE PO Box 3160</p> <p>City Cedar Rapids State IA Zip Code 52401</p> <p>Purpose of Disbursement Telephone</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6670</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 81.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>654.00</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 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)  
Friends of Maurice Hinchey

<p><b>A.</b> Full Name (Last, First, Middle Initial) MCI, Inc.</p> <p>Mailing Address 500 Second Ave. SE PO Box 3160</p> <p>City Cedar Rapids State IA Zip Code 52401</p> <p>Purpose of Disbursement Telephone</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6672 <b>Date of Disbursement</b> 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 91.91</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nat'l Comm For An Effective Congress</p> <p>Mailing Address 122 C Street, NW Suite 650</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Precinct Targeting</p> <p>Candidate Name Nat'l Comm For An Effective Congress</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6642 <b>Date of Disbursement</b> 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* in-kind received</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NGP Software Inc.</p> <p>Mailing Address 1225 Eye St NW, Suite 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Campaign Consultant</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6673 <b>Date of Disbursement</b> 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

2666.91

**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)  
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) NYS Democratic Committee	Transaction ID: D6727 Date of Disbursement 09 / 13 / 2008
	Mailing Address 461 Park Avenue South	Amount of Each Disbursement this Period 902.92
	City New York State NY Zip Code 10016	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Voter Files	
	Candidate Name NYS Democratic Committee	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NYS Democratic Committee	Transaction ID: D6648 Date of Disbursement 09 / 18 / 2008
	Mailing Address 461 Park Avenue South	Amount of Each Disbursement this Period 5000.00
	City New York State NY Zip Code 10016	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  * in-kind received
	Purpose of Disbursement Use of Voter File Data	
	Candidate Name NYS Democratic Committee	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NYS Income Tax	Transaction ID: D6696 Date of Disbursement 09 / 03 / 2008
	Mailing Address W. A. Harriman Campus	Amount of Each Disbursement this Period 257.04
	City Albany State NY Zip Code 12227-0134	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wage Withholding Tax	
	Candidate Name	Category/ Type
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	6159.96
<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)  
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: D6698 Date of Disbursement 08 / 30 / 2008
	Mailing Address Route 9W	Amount of Each Disbursement this Period 26.98
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing 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.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: D6737 Date of Disbursement 09 / 02 / 2008
	Mailing Address Route 9W	Amount of Each Disbursement this Period 24.83
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing 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) ▼

C.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: D6735 Date of Disbursement 09 / 12 / 2008
	Mailing Address Route 9W	Amount of Each Disbursement this Period 33.46
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	85.27
<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)  
Friends of Maurice Hinchey

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

Mailing Address Route 9W

City Kingston State NY Zip Code 12401

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D6736  
Date of Disbursement: 09 / 13 / 2008

Amount of Each Disbursement this Period: 37.79

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

**B.** Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address Route 9W

City Kingston State NY Zip Code 12401

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D6699  
Date of Disbursement: 09 / 21 / 2008

Amount of Each Disbursement this Period: 180.26

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

**C.** Full Name (Last, First, Middle Initial)  
Orlandos Catering

Mailing Address 2468 Vestal Parkway

City Vestal State NY Zip Code 13850

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D6728  
Date of Disbursement: 09 / 14 / 2008

Amount of Each Disbursement this Period: 700.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

918.05

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)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)  
Plaza Pizza

Transaction ID: D6582  
Date of Disbursement

Mailing Address Kingston Plaza

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	0	8

City Kingston State NY Zip Code 12401

Amount of Each Disbursement this Period

Purpose of Disbursement  
Volunteer Expense

19.00
-------

Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Plaza Pizza

Transaction ID: D6652  
Date of Disbursement

Mailing Address Kingston Plaza

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	8

City Kingston State NY Zip Code 12401

Amount of Each Disbursement this Period

Purpose of Disbursement  
Volunteer Expense

62.00
-------

Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Postmaster

Transaction ID: D6678  
Date of Disbursement

Mailing Address 50 Main Street

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

City Kingston State NY Zip Code 12401

Amount of Each Disbursement this Period

Purpose of Disbursement  
Postage

100.80
--------

Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

181.80
--------

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

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# 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)  
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D6679 Date of Disbursement
	Mailing Address 50 Main Street	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Kingston State NY Zip Code 12401	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="420.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D6680 Date of Disbursement
	Mailing Address 50 Main Street	<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City Kingston State NY Zip Code 12401	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="128.10"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D6681 Date of Disbursement
	Mailing Address 50 Main Street	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Kingston State NY Zip Code 12401	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="504.42"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1052.52"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) Preferred Mutual Insurance Co	Transaction ID: D6663 Date of Disbursement 08 / 28 / 2008
	Mailing Address PO Box 888	Amount of Each Disbursement this Period 19.00
	City Norwich State NY Zip Code 13815	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Insurance Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) Rob Allegro	Transaction ID: D6716 Date of Disbursement 09 / 10 / 2008
	Mailing Address 89 Court Street	Amount of Each Disbursement this Period 1100.00
	City Binghamton State NY Zip Code 13901	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Peter Saltonstall	Transaction ID: D6644 Date of Disbursement 09 / 02 / 2008
	Mailing Address King Ferry Winery 658 Lake Road	Amount of Each Disbursement this Period 400.00
	City King Ferry State NY Zip Code 13081	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wine Candidate Name	Category/Type
	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) ▼

\* in-kind received

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1519.00
<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)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)  
Staples The Office Superstore

Mailing Address 1399 Ulster Ave.

City Kingston State NY Zip Code 12401

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6693

Date of Disbursement

09 / 03 / 2008

Amount of Each Disbursement this Period

531.37

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

B.

Full Name (Last, First, Middle Initial)  
Staples The Office Superstore

Mailing Address 1399 Ulster Ave.

City Kingston State NY Zip Code 12401

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6739

Date of Disbursement

09 / 10 / 2008

Amount of Each Disbursement this Period

137.29

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

C.

Full Name (Last, First, Middle Initial)  
Staples The Office Superstore

Mailing Address 1399 Ulster Ave.

City Kingston State NY Zip Code 12401

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6718

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

53.94

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

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

722.60

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)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)  
Staples The Office Superstore

Mailing Address 1399 Ulster Ave.

City Kingston State NY Zip Code 12401

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6738

Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

37.23

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

B.

Full Name (Last, First, Middle Initial)  
Steel House

Mailing Address 88 East Strand Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6740

Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

451.00

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

C.

Full Name (Last, First, Middle Initial)  
Susanne Herl

Mailing Address 796 Murray Road

City Kingston State NY Zip Code 12401

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6688

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

3537.37

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

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

4025.60

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)  
Friends of Maurice Hinchey

<p><b>A.</b> Full Name (Last, First, Middle Initial) Susanne Herl</p> <p>Mailing Address 796 Murray Road</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Reimburse Travel Expense</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6734</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="369.13"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Time Warner Mid Hudson</p> <p>Mailing Address 1279 Route 300</p> <p>City Newburgh State NY Zip Code 12550</p> <p>Purpose of Disbursement Cable</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6664</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="127.07"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ulster Savings Bank</p> <p>Mailing Address 280 Wall Street</p> <p>City Kingston State NY Zip Code 12401</p> <p>Purpose of Disbursement Wage Withholding Tax</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D6729</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1460.22"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</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)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)  
Ulster Savings Bank

Mailing Address 280 Wall Street

City Kingston State NY Zip Code 12401

Purpose of Disbursement  
Bank Service Charge

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6762

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

10.00

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

B.

Full Name (Last, First, Middle Initial)  
UPS

Mailing Address P.O. Box 4980

City Hagerstown State MD Zip Code 21747

Purpose of Disbursement  
Delivery

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6659

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

25.15

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

C.

Full Name (Last, First, Middle Initial)  
Verizon

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12250

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D6666

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

108.36

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

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

143.51

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)

PAGE 60 / 63

<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)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)  
Verizon

Transaction ID: D6667

Date of Disbursement

Mailing Address P.O. Box 15124

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	8

City Albany State NY Zip Code 12250

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Telephone

Category/  
Type

Candidate Name

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

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

3000.00

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

35794.03

**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 checked="" 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)  
Friends of Maurice Hinchey

A.	Full Name (Last, First, Middle Initial) DCCC	Transaction ID: D6733 Date of Disbursement 09 / 15 / 2008
	Mailing Address 430 South Capitol Street SE	Amount of Each Disbursement this Period 25000.00
	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 Transfer Candidate Name DCCC Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
B.	Full Name (Last, First, Middle Initial) Ulster County Democratic Committee	Transaction ID: D6720 Date of Disbursement 09 / 12 / 2008
	Mailing Address 292C Fair Street	Amount of Each Disbursement this Period 1300.00
	City Kingston State NY Zip Code 12401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Transfer Candidate Name Ulster County Democratic Committee Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

26300.00

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

26300.00

# 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 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)  
Friends of Maurice Hinchey

**A.**

Full Name (Last, First, Middle Initial)  
Ancient Order of Hibernians

Mailing Address PO Box 2026

City Kingston State NY Zip Code 12402

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D6715  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**B.**

Full Name (Last, First, Middle Initial)  
Latino Democratic Com Of Orange County

Mailing Address 36 Merriewold Lane North

City Monroe State NY Zip Code 10959

Purpose of Disbursement Contribution

Candidate Name Latino Democratic Com Of Orange County

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D6676  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**C.**

Full Name (Last, First, Middle Initial)  
The Queens Galley

Mailing Address 254 Washington Avenue

City Kingston State NY Zip Code 12401

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D6709  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**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)

PAGE 63 / 63

<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

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)  
Friends of Maurice Hinchey

A.

Full Name (Last, First, Middle Initial)  
U.C. Community College Foundation

Transaction ID: D6710

Date of Disbursement

Mailing Address Route 209

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	8

City State Zip Code  
Stone Ridge NY 12484

Amount of Each Disbursement this Period

300.00
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Purpose of Disbursement  
Contribution

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Candidate Name

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

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

300.00
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TOTAL This Period (last page this line number only) .....

2050.00
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