

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

JUL 15 11 24 AM '00

**HAND DELIVERED**

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Committee to Elect Gary Ackerman		2. FEC IDENTIFICATION NUMBER C00165241
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. PO Box 95		
CITY, STATE and ZIP CODE Fresh Meadows, NY 11365	STATE/DISTRICT NY-05	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

### 4. TYPE OF REPORT

- |  |   |
|--|---|
| <input type="checkbox"/> April 15 Quarterly Report<br><input checked="" type="checkbox"/> July 15 Quarterly Report<br><input type="checkbox"/> October 15 Quarterly Report<br><input type="checkbox"/> January 31 Year End Report<br><input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____<br><input type="checkbox"/> 30-Day Post-Election Report following the General Election on _____ in the State of _____<br><input type="checkbox"/> Termination Report |
|--|---|

This report contains activity for:  Primary Election  General Election  Special Election  Runoff Election

### SUMMARY

5. Covering Period <u>4/1/00</u> through <u>6/30/00</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$127,342.08	\$188,009.66
(b) Total Contribution Refunds (from Line 20(d))	\$500.00	\$7,500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$126,842.08	\$181,509.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$40,324.92	\$114,241.79
(b) Total Offsets to Operating Expenditures (from Line 14)	\$38.77	\$2,096.70
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$40,286.15	\$112,145.09
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$745,479.81	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20489 Toll Free 800-424-9530 Local 202-684-1100
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$11,454.26	

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

Type or Print Name of Treasurer Robert Barnett		Date 7/15/00
Signature of Treasurer 		

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

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

# DETAILED SUMMARY PAGE

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

Name of Committee (in full) Committee to Elect Gary Ackerman	Report Covering the Period:	
	From: 4/1/00	To: 6/30/00
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	\$59,850.00	
(ii) Unitemized	\$6,036.00	
(iii) Total of contributions from individuals	\$65,886.00	\$99,727.84
(b) Political Party Committees	\$156.08	\$381.82
(c) Other Political Committees (such as PACs)	\$61,300.00	\$88,900.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a)(i), (b), (c) and (d)))	\$127,342.08	\$189,009.66
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$36.77	\$2,098.70
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$5,404.01	\$7,765.61
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$132,784.86	\$198,871.97
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$40,324.92	\$114,241.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$7,000.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$500.00	\$500.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$500.00	\$7,500.00
21. OTHER DISBURSEMENTS	\$13,905.00	\$13,905.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$54,729.92	\$135,646.79
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 667,424.87	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 132,784.86	
25. SUBTOTAL (add Line 23 and Line 24)	\$ 800,209.73	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 54,729.92	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 745,479.81	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 1 OF 12  
FOR LINE NUMBER 11(a)(1)

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

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman CDD185241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Selvaraj Rajabhathor 215-18 49th Ave. Flushing, NY 11384	KR Information Tech Inc	6/30/00	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation President		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marie Lamarre 101 Hempstead Ave Albertson, NY 11507	Family Chiropractice	5/23/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation Chiropracter		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sally Magid 10 Old Homestead Way Albertson, NY 11507	Information Requested	6/27/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation Information Requested		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chantal Sejour 210 Perry Street Hempstead, NY 11550	Information Requested	5/23/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation Information Requested		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
V.M. Patil 67 Fox Lane Huntington Station, NY 11746	Information Requested	6/23/00	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation Information Requested		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		\$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hossein Sadeghpour 98 Fayer Weather St Cambridge, MA 02138	Harvard-Smithsonian	5/18/00	\$750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation Assist. Professor		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hossein Sadeghpour 98 Fayer Weather St Cambridge, MA 02138	Harvard-Smithsonian	6/12/00	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation Assist. Professor		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		\$1,000.00

**SUBTOTAL** of Receipts This Page (optional) ..... \$4,000.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 2 OF 12  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Altschuler 6963 Stone Vale Dr Vienna, VA 22181	That's Amore  Occupation Owner	4/6/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 1	\$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rita Schwartz 129 Hicks Street Brooklyn, NY 11201	The General Contractor Assoc.  Occupation Director of Gov't Relations	4/6/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jean-Robert Desrouleaux 10 Grace Lane Oyster Bay, NY 11771	Self Employed  Occupation Self Employed	5/23/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Man Ching Wong 6607 Elder Ave Springfield, VA 22150	Information Requested  Occupation Information Requested	4/15/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ahdolah Daryani 15-66 208th Place Flushing, NY 11360	Bimmer's & Benz of North America  Occupation Business Owner	5/18/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Springer 6221 29th St NW Washington, DC 20015	Oldaker & Harris LLP  Occupation Attorney	4/6/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$750.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Springer 6221 29th St NW Washington, DC 20015	Oldaker & Harris LLP  Occupation Attorney	6/23/00	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$750.00	

SUBTOTAL of Receipts This Page (optional)

\$4,750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 3 OF 12  
FOR LINE NUMBER 11(a)(i)

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**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code Jean Claude Compas 1D Wilshire Dr Great Neck, NY 11020	Name of Employer Family Medical Practice  Occupation CFO	Date (month, day, year)  5/23/00	Amount of Each Receipt this Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code Esther Coopersmith 2230 S. St NW Washington, DC 20008	Name of Employer Self-Employed  Occupation Real Estate	Date (month, day, year)  4/8/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Jeanne Campbell 1010 Pennsylvania Ave. SE Washington, DC 20003	Name of Employer Campbell-Raupe, Inc.  Occupation Executive	Date (month, day, year)  4/26/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code Edouard Hazel 18-15 215th St Apt 16F Flushing, NY 11360	Name of Employer Self Employed  Occupation Physician	Date (month, day, year)  6/27/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code Edward Garsh 21 Sweet Hollow Road Huntington, NY 11743	Name of Employer West Hills Day Camp  Occupation Day Camp Operator	Date (month, day, year)  6/23/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Ravi Akhoury 1 Blanchet Court Florham Park, NJ 07932	Name of Employer Mackay Shields  Occupation Chairman and CEO	Date (month, day, year)  6/23/00	Amount of Each Receipt this Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code Robert Weiss 118 Ryder Ave Huntington Station, NY 11745	Name of Employer Robert Weiss & Co. LLP  Occupation Attorney	Date (month, day, year)  5/23/00	Amount of Each Receipt this Period  \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			<b>\$5,000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

Use separate schedule(s)  
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Detailed Summary Page

PAGE 4 OF 12  
FOR LINE NUMBER 11(a)(1)

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**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Weiss 119 Ryder Ave Huntington Station, NY 11746	Robert Weiss & Co. LLP	5/23/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Henry Braulieu 27 Dogwood Rd Albertson, NY 11507	Self Employed	5/23/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Glen Wasserstein 1322 15th St NW #21 Washington, DC 20005	Wilson & Wasserstein	4/8/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sherry Goldstein 15 Mark Drive Rye Brook, NY 10573	Homemaker	6/30/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$2,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sherry Goldstein 15 Mark Drive Rye Brook, NY 10573	Homemaker	8/30/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeff Webb 47109 Kentwell Place Potomac Falls, VA 20165	Mid Web Inc	4/15/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Melvin Fishman 5 Piper Drive Searingtown, NY 11507	Information Requested	8/27/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional) ..... \$6,000.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 5 OF 12  
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Committee to Elect Gary Ackerman C0D165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nader Khazzele 43-23 185th St #2H Flushing, NY 11358	Self Employed	6/12/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self Employed	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Javao Gerami 22 cedar Swamp Rd Storrs Mansfield, CT 06268	Gold Medal Inc.	5/18/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Account Manager	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederick Sievert 280 S. Lake Dr Stamford, CT 06903	New York Life Insurance Co.	6/23/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice Chairman	Aggregate Year-to-Date > \$	\$2,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederick Sievert 280 S. Lake Dr Stamford, CT 06903	New York Life Insurance Co.	6/23/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice Chairman	Aggregate Year-to-Date > \$	\$2,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Trapp 53 Wlster Ave Metuchen, NJ 08840	New York Life Insurance	6/23/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Vice President and	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Trapp 53 Wlster Ave Metuchen, NJ 08840	New York Life Insurance	6/23/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Vice President and	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nathan Katz 45 Hemlock Drive East Hills, NY 11576	Nathan Katz Realty	6/27/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$	\$1,500.00

SUBTOTAL of Receipts This Page (optional)

\$5,500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 8 OF 12  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Committee to Elect Gary Ackerman C00165241

<b>A. Full Name, Mailing Address and ZIP Code</b> Nathan Katz 45 Hemlock Drive East Hills, NY 11576	Name of Employer Nathan Katz Realty	Date (month, day, year) 6/27/00	Amount of Each Receipt this Period \$500.00
	Occupation Owner	Aggregate Year-to-Date > \$ \$1,500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> Jessie Colgate 5815 Potomac Ave Washington, DC 20016	Name of Employer New York Life Insurance	Date (month, day, year) 6/23/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Senior Vice President	Aggregate Year-to-Date > \$ \$1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> Chung Luen Wong 6607 Elder Ave Springfield, VA 22150	Name of Employer Information Requested	Date (month, day, year) 4/8/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Information Requested	Aggregate Year-to-Date > \$ \$1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> Ronald Vaas 510 Main St New York, NY 10044	Name of Employer Information Requested	Date (month, day, year) 6/27/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Information Requested	Aggregate Year-to-Date > \$ \$1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> Michena Brooks 61 Demille Ave Elmont, NY 11003	Name of Employer Information Requested	Date (month, day, year) 6/23/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Information Requested	Aggregate Year-to-Date > \$ \$1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> Armand Liberati 3126 Plantation Pkwy Fairfax, VA 22030	Name of Employer Crutchley, Marginal & Tosi	Date (month, day, year) 4/15/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Certified Public Accountant	Aggregate Year-to-Date > \$ \$1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> Sy Sternberg 9 Stoneleigh Manor Lane Purchase, NY 10577	Name of Employer New York Life Insurance Co.	Date (month, day, year) 6/23/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Chairman & CED	Aggregate Year-to-Date > \$ \$2,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

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

\$8,500.00

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 7 OF 12  
FOR LINE NUMBER 11(a)(1)

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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C0D165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sy Sternberg 9 Stoneleigh Manor Lane Purchase, NY 10577	New York Life Insurance Co.	6/23/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman & CEO	Aggregate Year-to-Date > \$	\$2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Rosenthal 117 E. 29th St. New York, NY 10016	J.R. Equities	6/27/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$2,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Rosenthal 117 E. 29th St. New York, NY 10016	J.R. Equities	6/27/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$2,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M. Eghtedarzadeh Kondrli 818 Yearling Drive New Hope, PA 18938	Information Requested	6/12/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Benarav 20 Northmoor Rd W Hartford, CT 06117	New York Life Insurance	6/30/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice Chairman	Aggregate Year-to-Date > \$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Benarav 20 Northmoor Rd W Hartford, CT 06117	New York Life Insurance	6/30/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice Chairman	Aggregate Year-to-Date > \$	\$2,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Annette Weiss 119 Ryder Ave Huntington Station, NY 11746	Homemaker	5/23/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$2,000.00

**SUBTOTAL of Receipts This Page (optional)** ..... \$7,000.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 8 OF 12  
FOR LINE NUMBER 11(a)(i)

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**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00185241

<b>A. Full Name, Mailing Address and ZIP Code</b> Annette Weiss 119 Rydar Ave Huntington Station, NY 11746  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Homemaker	<b>Date (month, day, year)</b> 5/23/00	<b>Amount of Each Receipt this Period</b> \$1,000.00
	<b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date</b> > \$ 2,000.00		
<b>B. Full Name, Mailing Address and ZIP Code</b> Sima Katz 45 Hemlock Dr Roslyn, NY 11576  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Homemaker	<b>Date (month, day, year)</b> 8/27/00	<b>Amount of Each Receipt this Period</b> \$500.00
	<b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>C. Full Name, Mailing Address and ZIP Code</b> Jila Kazerounian 68 Candide Lane Storms Mansfield, CT 06268  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> University of Connecticut	<b>Date (month, day, year)</b> 5/18/00	<b>Amount of Each Receipt this Period</b> \$500.00
	<b>Occupation</b> Senior Programmer / Analyst  <b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>D. Full Name, Mailing Address and ZIP Code</b> Aruna Saxena 35 Shrubhollow Road Roslyn, NY 11576  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Anli Saxena	<b>Date (month, day, year)</b> 6/30/00	<b>Amount of Each Receipt this Period</b> \$250.00
	<b>Occupation</b> Assistant  <b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>E. Full Name, Mailing Address and ZIP Code</b> Daniel Weiss 350 Bathurst Circle Roslyn, NY 11576  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> TRANS-PACKERS SERVICES	<b>Date (month, day, year)</b> 6/27/00	<b>Amount of Each Receipt this Period</b> \$500.00
	<b>Occupation</b> OWNER  <b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>F. Full Name, Mailing Address and ZIP Code</b> Edward Blumenfeld 7 The Dogwoods Roslyn Estates, NY 11576  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Blumenfeld Development Group	<b>Date (month, day, year)</b> 6/23/00	<b>Amount of Each Receipt this Period</b> \$1,000.00
	<b>Occupation</b> President  <b>Aggregate Year-to-Date</b> > \$ 1,000.00		
<b>G. Full Name, Mailing Address and ZIP Code</b> Frank Wisner 480 Park Ave New York, NY 10022  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> A.I.G.	<b>Date (month, day, year)</b> 6/23/00	<b>Amount of Each Receipt this Period</b> \$1,000.00
	<b>Occupation</b> Vice President  <b>Aggregate Year-to-Date</b> > \$ 1,000.00		

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

\$4,750.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 9 OF 12  
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NAME OF COMMITTEE (In Full)

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Christine Cable 100 River Drive Bay Ridge Annapolis, MD 21403	Self-Employed	4/6/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Counselor	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sheldon Ornstein Clarkson Ave Brooklyn, NY	Self Employed	6/27/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anton Milohnic 18 Parkview Dr Albertson, NY 11507	Information Requested	6/27/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Alan Risi 154-43 Riverside Dr. Flushing, NY 11357	Georal International	6/12/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kazem Kazerounian 68 Candide Lane Storrs, CT 06268	University of Connecticut	6/12/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kazem Kazerounian 68 Candide Lane Storrs, CT 06268	University of Connecticut	5/18/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Govindappa Rangaiah 70 Stratton Road Scarsdale, NY 10583	Information Requested	6/23/00	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$250.00
<b>SUBTOTAL of Receipts This Page (optional)</b>			\$4,250.00
<b>TOTAL This Period (test page this line number only)</b>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 10 OF 12  
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**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

<b>A. Full Name, Mailing Address and ZIP Code</b> Mahnaz Nasseri 9B Fayerwerther St Cambridge, MA 01238  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Wentworth Institute of Technology	Date (month, day, year) 5/18/00	Amount of Each Receipt this Period \$250.00
	Occupation Assistant Professor  Aggregate Year-to-Date > \$ 250.00		
<b>B. Full Name, Mailing Address and ZIP Code</b> Sayed Shah Rohany  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 6/12/00	Amount of Each Receipt this Period \$600.00
	Occupation Information Requested  Aggregate Year-to-Date > \$ 600.00		
<b>C. Full Name, Mailing Address and ZIP Code</b> Mohammad Mirzal 145 Northwood Dr Unit D8 Atlanta, GA 30342  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 6/12/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Information Requested  Aggregate Year-to-Date > \$ 1,000.00		
<b>D. Full Name, Mailing Address and ZIP Code</b> Elizabeth Rosenthal 117 E. 29th St New York, NY 10016  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Homemaker	Date (month, day, year) 6/27/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Homemaker  Aggregate Year-to-Date > \$ 2,000.00		
<b>E. Full Name, Mailing Address and ZIP Code</b> Elizabeth Rosenthal 117 E. 29th St. New York, NY 10016  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Homemaker	Date (month, day, year) 6/27/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Homemaker  Aggregate Year-to-Date > \$ 2,000.00		
<b>F. Full Name, Mailing Address and ZIP Code</b> Thomas Quinn 1666 K St NW Suite 500 Washington, DC 20006-2809  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer O'Connor and Hannan	Date (month, day, year) 4/6/00	Amount of Each Receipt this Period \$250.00
	Occupation Attorney  Aggregate Year-to-Date > \$ 250.00		
<b>G. Full Name, Mailing Address and ZIP Code</b> Parnelle Nacier 20 The Drawbridge Woodbury, NY 11797  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed	Date (month, day, year) 5/23/00	Amount of Each Receipt this Period \$500.00
	Occupation Self Employed  Aggregate Year-to-Date > \$ 500.00		

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

\$4,600.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 11 OF 12  
FOR LINE NUMBER 11(a)(i)

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**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00185241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pamelle Naciar 20 The Drawbridge Woodbury, NY 11797	Self Employed	5/23/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self Employed	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elliott Zaretsky 229-56th Ave Flushing, NY 11364	Maxi Aids	5/7/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mahamad Afefeh 185 Pinewood Road Hartsdale, NY 10530	Engineer	5/18/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jamileh Samle 15-86 208th Place Flushing, NY 11380	Housewife	5/18/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Goldstein 15 Mark Drive Rye Brook, NY 10573	Toys-R-Us	6/30/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	Aggregate Year-to-Date > \$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Goldstein 15 Mark Drive Rye Brook, NY 10573	Toys-R-Us	6/30/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	Aggregate Year-to-Date > \$	\$2,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bella Lamarre 101 Hempstead Ave Rockville Centre, NY 11570	Long Island Hospital	5/23/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Nurse	Aggregate Year-to-Date > \$	\$1,000.00
<b>SUBTOTAL of Receipts This Page (optional)</b>			\$8,000.00
<b>TOTAL This Period (last page this line number only)</b>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 12 OF 12  
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)  
Committee to Elect Gary Ackerman C00165241

<b>A. Full Name, Mailing Address and ZIP Code</b> Davidoff & Malito LLP 605 Third Avenue New York, NY 10158  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Davidoff & Malito LLP  PARTNERSHIP—partners below  Occupation Attorney  Aggregate Year-to-Date > \$	Date (month, day, year) 4/8/00  \$500.00	Amount of Each Receipt this Period \$500.00
	<b>B. Full Name, Mailing Address and ZIP Code</b> Ken Malito 404 Queens Row St Herndon, VA 20170  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Davidoff & Malito LLP  Occupation Partner  Aggregate Year-to-Date > \$	Date (month, day, year) 4/6/00  \$500.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Hunton & Williams 1900 K NW Washington, DC 20008  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hunton & Williams  PARTNERSHIP—partners below  Occupation Attorney  Aggregate Year-to-Date > \$	Date (month, day, year) 5/7/00  \$500.00	Amount of Each Receipt this Period \$500.00
	<b>D. Full Name, Mailing Address and ZIP Code</b> Virginia Abrecht 1900 K St NW Washington, DC 20008  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hunton & Williams  Occupation Partner  Aggregate Year-to-Date > \$	Date (month, day, year) 5/7/00  \$500.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Littman Krooks Roth & Ball 655 Third Ave New York, NY 10017  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Littman Krooks Roth & Ball  PARTNERSHIP—partners below  Occupation Attorneys  Aggregate Year-to-Date > \$	Date (month, day, year) 5/23/00  \$500.00	Amount of Each Receipt this Period \$500.00
	<b>F. Full Name, Mailing Address and ZIP Code</b> Mitchell Littman 855 Third Ave New York, NY 10017  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Littman Krooks Roth & Ball  Occupation Partner  Aggregate Year-to-Date > \$	Date (month, day, year) 5/23/00  \$500.00
<b>G. Full Name, Mailing Address and ZIP Code</b>     Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer     Occupation    Aggregate Year-to-Date > \$	Date (month, day, year)     	Amount of Each Receipt this Period    

SUBTOTAL of Receipts This Page (optional) .....	\$1,500.00
TOTAL This Period (last page this line number only) .....	\$59,850.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11(b)

Contributions from Party Committees

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NAME OF COMMITTEE (In Full)

Committee to Elect Gary Ackerman C00166241

A. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol St. SE Washington, DC 20003	Name of Employer * In-Kind: Fundraising Services Occupation	Date (month, day, year) 6/30/00	Amount of Each Receipt this Period \$23.32 *
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 381.82		
B. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol St. SE Washington, DC 20003	Name of Employer * In-Kind: Fundraising Services Occupation	Date (month, day, year) 5/30/00	Amount of Each Receipt this Period \$55.81 *
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 381.82		
C. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol St. SE Washington, DC 20003	Name of Employer * In-Kind: Fundraising Services Occupation	Date (month, day, year) 4/30/00	Amount of Each Receipt this Period \$76.95 *
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 381.82		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	\$158.08
TOTAL This Period (last page this line number only)	\$158.08

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full)			
Committee to Elect Gary Ackerman C00185241			
<b>A. Full Name, Mailing Address and ZIP Code</b> NY Stock Exchange Inc.PAC Mr. Joseph J. Paradise 1800 K Street N.W. Washington, DC 20006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year) 5/7/00  \$500.00	Amount of Each Receipt this Period \$500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> American Sugarbeet Growers Assoc. PAC Mr. Luther Markwart 1156 15th Street NW 1101 Washington, DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year) 4/11/00  \$500.00	Amount of Each Receipt this Period \$500.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Firefighters Interested in Regis. & Educ. Mr. Frederick H. Nesblitt 1750 New York Ave. N.W. Washington, DC 20006-5395 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year) 5/7/00  \$1,000.00	Amount of Each Receipt this Period \$1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> America's Community Bankers 900 18th Street NW Suite 400 Washington, DC 20006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year) 6/12/00  \$500.00	Amount of Each Receipt this Period \$500.00
<b>E. Full Name, Mailing Address and ZIP Code</b> ASCAP Legislative Fund for the Arts 1 Lincoln Plaza New York, NY 10023 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year) 4/11/00  \$250.00	Amount of Each Receipt this Period \$250.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Bell Atlantic Federal Pac 1717 Arch Street 479 Philadelphia, PA 19103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year) 4/8/00  \$1,000.00	Amount of Each Receipt this Period \$1,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Delta PAC 211 E. Chicago Avenue Chicago, IL 60611 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year) 6/30/00  \$500.00	Amount of Each Receipt this Period \$500.00
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			\$4,250.00
<b>TOTAL This Period (last page this line number only)</b> .....			



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

PAGE 2 OF 10  
FOR LINE NUMBER 11(c)

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

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Coca-Cola Company Non Partisan Committee for Good Government P.O. Drawer 1734 Atlanta, GA 30301		6/12/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Credit Union Legislative Action Council 805 15th Street NW 300 Washington, DC 20005-2207		4/25/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Seafarers Political -SPAD Activity Donatio Mr. Terry Turner 5201 Auth Way Camp Springs, MD 20746		4/6/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ADVO Inc. PAC Mr. Vincent Guiliano 239 West Service Road Hartford, CT 06101		4/6/00	\$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mortgage Bankers PAC 1125 15 Street N.W. Washington, DC 20005		4/6/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Citigroup PAC - 1101 Pennsylvania Ave Suite 1000 Washington, DC 20004		5/7/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Optometric Assn. 1505 Prince Street Alexandria, VA 22314		6/12/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	\$7,000.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 10  
FOR LINE NUMBER 11(c)

**Contributions from Other Political Committees**

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

**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code American Optometric Assn. 1505 Prince Street Alexandria, VA 22314	Name of Employer  Occupation	Date (month, day, year)  5/18/00	Amount of Each Receipt this Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$2,000.00	
B. Full Name, Mailing Address and ZIP Code Ernst & Young Political Action Committee 11 Madison Ave, 7th Floor Washington, DC 20036-	Name of Employer  Occupation	Date (month, day, year)  6/30/00	Amount of Each Receipt this Period  \$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$2,000.00	
C. Full Name, Mailing Address and ZIP Code Apr-Pac 9015 Mountain Ridge Drive Suite 220 Austin, TX 78758	Name of Employer  Occupation	Date (month, day, year)  5/18/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code Apr-Pac 9015 Mountain Ridge Drive Suite 220 Austin, TX 78758	Name of Employer  Occupation	Date (month, day, year)  6/12/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code Met Life Employees Pac One Madison Ave Washington, DC 20036	Name of Employer  Occupation	Date (month, day, year)  4/6/00	Amount of Each Receipt this Period  \$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$5,000.00	
F. Full Name, Mailing Address and ZIP Code Southern Minnesota Sugar Cooperative PAC - P.O. Box 500 Renville, MN 56284	Name of Employer  Occupation	Date (month, day, year)  4/11/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
G. Full Name, Mailing Address and ZIP Code Lockheed Martin Employees Pac 1725 Jefferson Davis Hwy Arlington, VA 22202	Name of Employer  Occupation	Date (month, day, year)  6/12/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			<b>\$10,000.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

**NAME OF COMMITTEE (in Full)**  
Committee to Elect Gary Ackerman CD0165241

<b>A. Full Name, Mailing Address and ZIP Code</b> Armer Maritime Officers Voluntary Political 650 Fourth Avenue Brooklyn, NY 11232  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/11/00	\$500.00
Aggregate Year-to-Date >		\$	\$500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> American Watch Assoc. PAC 1201 Pennsylvania Ave. NW Washington, DC 20044  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/11/00	\$500.00
Aggregate Year-to-Date >		\$	\$500.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Morganpac Mr. Cory Strupp 60 Wall Street New York, NY 10260  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	5/7/00	\$1,000.00
Aggregate Year-to-Date >		\$	\$1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Realtors Pac 430 N. Michigan Ave. Chicago, IL 60611  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/6/00	\$1,000.00
Aggregate Year-to-Date >		\$	\$3,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Realtors Pac 430 N. Michigan Ave. Chicago, IL 60611  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/12/00	\$2,000.00
Aggregate Year-to-Date >		\$	\$3,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Edo Corporation Pac 60 E. 42nd Street Suite 6010 New York, NY 10165  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/8/00	\$500.00
Aggregate Year-to-Date >		\$	\$500.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Boat Owners Association of the U.S. - PAC 880 South Pickett Street Alexandria, VA 22304  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/6/00	\$500.00
Aggregate Year-to-Date >		\$	\$500.00

SUBTOTAL of Receipts This Page (optional)	\$6,000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 5 OF 10  
FOR LINE NUMBER 11(c)

**Contributions from Other Political Committees**

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**NAME OF COMMITTEE (in Full)**  
Committee to Elect Gary Ackerman C00165241

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Association of Flight Attendants-FLIGHT PA Ms. Jo Ellen Deutsch 1625 Mass. Ave. N.W. Washington, DC 20036</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year)  4/25/00</p>	<p>Amount of Each Receipt this Period  \$500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 500.00</p>		
<p><b>B. Full Name, Mailing Address and ZIP Code</b> CNA Citizens for Good Government (PAC) 7361 Calhoun Place Rockville, MD 20855</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year)  6/12/00</p>	<p>Amount of Each Receipt this Period  \$500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 500.00</p>		
<p><b>C. Full Name, Mailing Address and ZIP Code</b> American Hospital Association 325 Seventh Street N. W. Washington, DC 20004</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year)  4/25/00</p>	<p>Amount of Each Receipt this Period  \$1,000.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>D. Full Name, Mailing Address and ZIP Code</b> National Rural Letter Carriers Association Political Action Committee 1630 Duke St. 4th Floor Alexandria, VA 22314-</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year)  5/18/00</p>	<p>Amount of Each Receipt this Period  \$500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>E. Full Name, Mailing Address and ZIP Code</b> National Rural Letter Carriers Association Political Action Committee 1630 Duke St. 4th Floor Alexandria, VA 22314-</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year)  6/12/00</p>	<p>Amount of Each Receipt this Period  \$500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>F. Full Name, Mailing Address and ZIP Code</b> A. F. G. E. Pac Ms. Betsy Reid 80 F. Street N. W. Washington, DC 20001</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year)  4/6/00</p>	<p>Amount of Each Receipt this Period  \$500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 500.00</p>		
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Sierra Club Political Committee 85 Second Street, 2nd Floor San Francisco, CA 94105-</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year)  4/25/00</p>	<p>Amount of Each Receipt this Period  \$500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 550.00</p>		

<p><b>SUBTOTAL of Receipts This Page (optional)</b> .....</p>	<p>\$4,000.00</p>
<p><b>TOTAL This Period (last page this line number only)</b> .....</p>	<p></p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 6 OF 10  
FOR LINE NUMBER 11(C)

**Contributions from Other Political Committees**

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**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code Sierra Club Political Committee 85 Second Street, 2nd Floor San Francisco, CA 94105-	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  5/23/00	Amount of Each Receipt this Period  \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  4/6/00	Amount of Each Receipt this Period  \$1,000.00
B. Full Name, Mailing Address and ZIP Code Cablevision Systems New York Pac 1 Media Crossways Woodbury, NY 11797	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  4/6/00	Amount of Each Receipt this Period  \$500.00
C. Full Name, Mailing Address and ZIP Code National Air Traffic Controllers PAC 1325 Massachusetts Ave NW Washington, DC 20005-	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  4/6/00	Amount of Each Receipt this Period  \$500.00
D. Full Name, Mailing Address and ZIP Code The NEA Fund for Children & Public Education 1201 16th Street N. W. Washington, DC 20036	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  4/6/00	Amount of Each Receipt this Period  \$500.00
E. Full Name, Mailing Address and ZIP Code Preston Gates Ellis Pac 1735 New York Ave. NW Ste 500 Washington, DC 20006	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  5/23/00	Amount of Each Receipt this Period  \$1,000.00
F. Full Name, Mailing Address and ZIP Code Comm On Letter Carriers N. A. L. C. Mr. Jerry Kane 100 Indiana Avenue N.W. Washington, DC 20001	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  4/26/00	Amount of Each Receipt this Period  \$500.00

**SUBTOTAL** of Receipts This Page (optional) ..... \$4,050.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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NAME OF COMMITTEE (In Full)  
 Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Enron-Pac 1400 Smith 4939 Houston, TX 77002		4/6/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ironworkers Political Action League 1750 New York Avenue N.W. Washington, DC 20008		5/18/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ironworkers Political Action League 1750 New York Avenue N.W. Washington, DC 20008		6/12/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Auction Markets Pac - Chicago Board Of Tr 141 W. Jackson Blvd Chicago, IL 60604		4/25/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BAE Systems PAC 1215 Jefferson David Hwy, Suite 1500 Arlington, VA 22202-		4/6/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bollemakers/Blacksmiths LEAP 753 State Avenue 585 Kansas City, KS 66101		5/7/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Institute Of Scrap Recycling Industries Mark Reiter 1325 G. Street N. W. Washington, DC 20005		4/11/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)	\$5,000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

PAGE 8 OF 10  
FOR LINE NUMBER 11(C)

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**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman CD0165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AICPA Effective Legis. Committee Mr. J. Thomas Higginbotham 1455 Pennsylvania Ave. NW Washington, DC 20007		4/11/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Local 138 PAC Intl Union of Operating Engineers P.O. BOX 206 Farmingdale, NY 11735		4/8/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code The Chase Manhattan Fund For Good Govt Bridget A. Fillpon 270 Park Avenue New York, NY 10017		6/12/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code National Committee To Preserve Social Secu Karen Hinks 2000 K. Street NW Washington, DC 20006		4/6/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code NAPUS PAC for Postmasters P.O. Box 16866 Alexandria, VA 22302-0868		6/23/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Plumbers Local Union #1 NYC PAC 158-29 Crossbay Blvd Jamaica, NY 11414		4/8/00	\$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
G. Full Name, Mailing Address and ZIP Code American Medical Political Action Committee Mr. John H. Scott 1101 Vermont Avenue N.W. Washington, DC 20005		5/18/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
<b>SUBTOTAL of Receipts This Page (optional)</b>			\$6,500.00
<b>TOTAL This Period (last page this line number only)</b>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE **8** OF **10**  
FOR LINE NUMBER **11(c)**

**Contributions from Other Political Committees**

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

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Medical Political Action Committee Mr. John H. Scott 1101 Vermont Avenue N.W. Washington, DC 20005		6/12/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Manton for Congress 4612 Queens Blvd. Sunnyside, Ny 11104		4/11/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bank of America PAC 100 North Tryon St Charlotte, NC 28255-		4/26/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chicago Mercantile Exchange 1299 Penn Ave, NW Suite 1275 Washington, DC 20004		4/26/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fleet/Norstar Financial Group Federal PAC 50 Kennedy Plaza Providence, RI 02903		5/7/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Assoc. of Trial Lawyers of America PAC Mr. Alan Parker 1050 31st Street N.W. Washington, DC 20007		4/6/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amalgamated Transit Union Cope Acct Volun Mr. Oliver W. Green 5025 Wisconsin Avenue N. W. Washington, DC 20016		4/6/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00

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

\$5,000.00

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

**Contributions from Other Political Committees**

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

PAGE 10 OF 10  
FOR LINE NUMBER 11(c)

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

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00105241

A. Full Name, Mailing Address and ZIP Code New York Life PAC 51 Madison Avenue New York, NY 10010	Name of Employer  Occupation	Date (month, day, year)  5/7/00	Amount of Each Receipt this Period  \$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 58,000.00	
B. Full Name, Mailing Address and ZIP Code New York Life PAC 51 Madison Avenue New York, NY 10010	Name of Employer  Occupation	Date (month, day, year)  6/27/00	Amount of Each Receipt this Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 59,000.00	
C. Full Name, Mailing Address and ZIP Code New York Life PAC 51 Madison Avenue New York, NY 10010	Name of Employer  Occupation	Date (month, day, year)  6/27/00	Amount of Each Receipt this Period  \$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 64,000.00	
D. Full Name, Mailing Address and ZIP Code Credit Suisse First Boston Government Action Fund 11 Madison Ave, 7th Floor New York, NY 10010	Name of Employer  Occupation	Date (month, day, year)  6/23/00	Amount of Each Receipt this Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 65,000.00	
E. Full Name, Mailing Address and ZIP Code Florida Sugar Cane League PAC 115 South Lopez Street Clewiston, FL 33440	Name of Employer  Occupation	Date (month, day, year)  4/6/00	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 65,500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
<b>SUBTOTAL of Receipts This Page (optional)</b>			<b>\$9,500.00</b>
<b>TOTAL This Period (last page this line number only)</b>			<b>\$61,300.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Offsets to Operating Expenditures

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

PAGE 1 OF 1  
FOR LINE NUMBER 14

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

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code Schneider's Of Capitol Hill 300 Massachusetts Ave Washington, DC 20002	Name of Employer  Occupation	Date (month, day, year)  4/16/00	Amount of Each Receipt this Period  \$38.77
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$38.77		
B. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			<b>\$38.77</b>
<b>TOTAL This Period (last page this line number only)</b> .....			<b>\$38.77</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER 15

Other Receipts

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

NAME OF COMMITTEE (In Full)

Committee to Elect Gary Ackerman C00165241

1. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163	Name of Employer * Interest Occupation	Date (month, day, year) 6/30/00	Amount of Each Receipt this Period \$375.11
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 7,765.61	
<hr/>			
B. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 7,765.61	
<hr/>			
C. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 7,765.61	
<hr/>			
D. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 7,765.61	
<hr/>			
E. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 7,765.61	
<hr/>			
F. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 7,765.61	
<hr/>			
G. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 7,765.61	

SUBTOTAL of Receipts This Page (optional) .....	\$4,545.05
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 15

Other Receipts

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

**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00105241

A. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163	Name of Employer * Interest Occupation	Date (month, day, year) 4/30/00	Amount of Each Receipt this Period \$485.08
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 7,785.61		
B. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163	Name of Employer * Interest Occupation	Date (month, day, year) 4/30/00	Amount of Each Receipt this Period \$373.88
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 7,785.61		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
<b>SUBTOTAL of Receipts This Page (optional)</b>			<b>\$858.96</b>
<b>TOTAL This Period (last page this line number only)</b>			<b>\$5,404.01</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 10  
FOR LINE NUMBER 17

**Operating Expenditures**

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**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wheaton Party Rental 10700 Hanna St Beltsville, MD 20705	Event Expenses (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/00	\$382.55
B. Full Name, Mailing Address and ZIP Code Sierra Club Political Committee 85 Second Street, 2nd Floor San Francisco, CA 94105-	Website Listing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$50.00 * * in-kind received
C. Full Name, Mailing Address and ZIP Code Best Years Studios 483 Boxwood Dr Water Mill, NY 11976	Photographer (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/00	\$115.29
D. Full Name, Mailing Address and ZIP Code David Andrukitis 50 E Street SE Washington, DC 20003	Mail House Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/00	\$1,367.35
E. Full Name, Mailing Address and ZIP Code David Andrukitis 50 E Street SE Washington, DC 20003	Mail House Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$895.18
F. Full Name, Mailing Address and ZIP Code Mr. Robert Barnett 10 LeCluse Lane Huntington, NY 11743	Payroll Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/00	\$1,670.00
G. Full Name, Mailing Address and ZIP Code Queens Tribune 174-15 Horace Harding Expressway Fresh Meadows, NY 11355	Expenses (Direct Mail) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/12/00	\$496.00
H. Full Name, Mailing Address and ZIP Code Barnett & Company 10 LeCluse Lane Huntington, NY 11743	ACCOUNTING Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/00	\$885.00
I. Full Name, Mailing Address and ZIP Code Jewish World 115 Middle Neck Rd. Great Neck, NY 11021	Print Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/00	\$324.00

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

\$5,785.37

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 10  
FOR LINE NUMBER 17

**Operating Expenditures**

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**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jewish World 115 Middle Neck Rd. Great Neck, NY 11021	Print Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$200.00
Clyde McPhatter 405 Gold Leaf Ave Capitol Heights, MD 20743	Catering (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/00	\$270.07
RCN 506 Carnegie Center 3rd Floor Princeton, NJ 08540-8243	Internet Access Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/00	\$50.00
RCN 506 Carnegie Center 3rd Floor Princeton, NJ 08540-8243	Internet Access Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/00	\$179.00
Federal Express 300 Maryland Avenue NE Washington, DC 20002	Messenger-FedEx Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$250.64
Federal Express 300 Maryland Avenue NE Washington, DC 20002	Messenger-FedEx Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$330.74
Federal Express 300 Maryland Avenue NE Washington, DC 20002	Messenger-FedEx Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$283.64
Federal Express 300 Maryland Avenue NE Washington, DC 20002	Messenger-FedEx Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$255.72
Eastern Queens Democratic Club P.O. Box 729 Flushing, NY 11362	Print Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/00	\$500.00

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

**\$2,329.81**

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

**Operating Expenditures**

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<b>NAME OF COMMITTEE (in Full)</b>			
Committee to Elect Gary Ackerman C00165241			
<b>A. Full Name, Mailing Address and ZIP Code</b> Brian R. Meara Public Relations Inc 321 Broadway New York, NY 10007	<b>Purpose of Disbursement</b> Consultant Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 5/23/00	<b>Amount of Each Disbursement This Period</b> \$4,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> AT&T P.O. BOX 13884 NEWARK, NJ 07188	<b>Purpose of Disbursement</b> Office Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 4/13/00	<b>Amount of Each Disbursement This Period</b> \$25.14
<b>C. Full Name, Mailing Address and ZIP Code</b> Pak Realty 358 Jericho Tpk Syosset, NY 11791	<b>Purpose of Disbursement</b> Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 5/7/00	<b>Amount of Each Disbursement This Period</b> \$200.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Pak Realty 358 Jericho Tpk Syosset, NY 11791	<b>Purpose of Disbursement</b> Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 6/12/00	<b>Amount of Each Disbursement This Period</b> \$100.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Pak Realty 358 Jericho Tpk Syosset, NY 11791	<b>Purpose of Disbursement</b> Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 4/10/00	<b>Amount of Each Disbursement This Period</b> \$100.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Pak Realty 358 Jericho Tpk Syosset, NY 11791	<b>Purpose of Disbursement</b> Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 6/28/00	<b>Amount of Each Disbursement This Period</b> \$100.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Postmaster 2106 Rayburn HOB Washington, DC 20515	<b>Purpose of Disbursement</b> Postage (Direct Mail) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 6/12/00	<b>Amount of Each Disbursement This Period</b> \$1,320.00
<b>H. Full Name, Mailing Address and ZIP Code</b> Postmaster 2106 Rayburn HOB Washington, DC 20515	<b>Purpose of Disbursement</b> Postage (Direct Mail) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 4/10/00	<b>Amount of Each Disbursement This Period</b> \$1,650.00
<b>I. Full Name, Mailing Address and ZIP Code</b> Parkside Printing Company 21-27 Garden Street Brooklyn, NY 11208	<b>Purpose of Disbursement</b> Filing Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 5/31/00	<b>Amount of Each Disbursement This Period</b> \$885.00
<b>SUBTOTAL of Disbursements This Page (optional)</b>			\$8,180.14
<b>TOTAL This Period (last page this line number only)</b>			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 10  
FOR LINE NUMBER 17

**Operating Expenditures**

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**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman CDD165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gypsy Strings 7213 Grubby Thicket Way Bethesda, MD 20817	Event Expenses (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/00	\$250.00
B. Full Name, Mailing Address and ZIP Code Van Capelle, Alan L. 14 Greenfield Lane Commack, NY 11725	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/00	\$1,069.65
C. Full Name, Mailing Address and ZIP Code Van Capelle, Alan L. 14 Greenfield Lane Commack, NY 11725	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/00	\$1,069.65
D. Full Name, Mailing Address and ZIP Code Van Capelle, Alan L. 14 Greenfield Lane Commack, NY 11725	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/00	\$1,069.65
E. Full Name, Mailing Address and ZIP Code Bell Atlantic P. O. Box 17398 Baltimore, MD 21297-0429	Office Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/00	\$54.46
F. Full Name, Mailing Address and ZIP Code Bell Atlantic P. O. Box 17398 Baltimore, MD 21297-0429	Office Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/00	\$130.35
G. Full Name, Mailing Address and ZIP Code Bell Atlantic P. O. Box 17398 Baltimore, MD 21297-0429	Office Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$130.89
H. Full Name, Mailing Address and ZIP Code Bell Atlantic P. O. Box 17398 Baltimore, MD 21297-0429	Office Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$54.05
I. Full Name, Mailing Address and ZIP Code Schneider's Of Capitol Hill 300 Massachusetts Ave Washington, DC 20002	Event Expenses (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/00	\$463.42

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

\$4,292.12

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



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Operating Expenditures**

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

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Petty Cash PO Box 15616 Washington, DC 20003	Office Exp. (Gen. Camp. Exp.) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/00	\$1,145.01
Democratic Congressional Campaign Committee 430 South Capitol St. SE Washington, DC 20003	Fundraising Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/00	\$23.32 * * in-kind received
Democratic Congressional Campaign Committee 430 South Capitol St. SE Washington, DC 20003	Fundraising Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/30/00	\$55.81 * * in-kind received
Democratic Congressional Campaign Committee 430 South Capitol St. SE Washington, DC 20003	Fundraising Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/30/00	\$76.95 * * in-kind received
NYS Employment Tax P. O. Box 1589 Albany, NY 12201	Unemployment Tax Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$457.52
At&T Wireless PO Box 9001309 Louisville, KY 40290-1309	Mobile Phone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$130.31
At&T Wireless PO Box 9001309 Louisville, KY 40290-1309	Mobile Phone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$95.29
At&T Wireless PO Box 9001309 Louisville, KY 40290-1309	Mobile Phone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/00	\$127.89
Hon. Gary L. Ackerman 182-15 Radnor Rd. Jamaica Estates, NY 11432	Mobile Phone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$190.34

<b>SUBTOTAL of Disbursements This Page (optional)</b> .....	<b>\$2,302.44</b>
<b>TOTAL This Period (last page this line number only)</b> .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Operating Expenditures**

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

**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hon. Gary L. Ackerman 182-15 Radnor Rd. Jamaica Estates, NY 11432	Office Exp. (Gen. Camp. Exp.) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$156.73
Hon. Gary L. Ackerman 182-15 Radnor Rd. Jamaica Estates, NY 11432	Office Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/00	\$64.33
Hon. Gary L. Ackerman 182-15 Radnor Rd. Jamaica Estates, NY 11432	Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/12/00	\$60.82
Hon. Gary L. Ackerman 182-15 Radnor Rd. Jamaica Estates, NY 11432	Gifts from Cand (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$53.10
Hon. Gary L. Ackerman 182-16 Radnor Rd. Jamaica Estates, NY 11432	Cand. Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$427.00
Hon. Gary L. Ackerman 182-15 Radnor Rd. Jamaica Estates, NY 11432	Expenses (Direct Mail) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$538.33
Len Harris Appliances 77-30 164 Flushing, NY	Office Exp. (Gen. Camp. Exp.) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/00	\$405.94
Long Islander Newspaper Inc. 322 Main st Huntington, NY 11743	Print Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$309.00
Long Islander Newspaper Inc. 322 Main st Huntington, NY 11743	Print Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$309.00

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

**\$2,345.25**

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page

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**Operating Expenditures**

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

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Inta-Boro Acres 88-19 101st Avenue Ozone Park, NY 11416	Cand. Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/10/00	\$437.56
Inta-Boro Acres 88-19 101st Avenue Ozone Park, NY 11416	Candidate Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/00	\$0.00
Times Ledger 41-02 Bell Blvd Bayside, NY 11361-1138	Print Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$297.00
Suffolk County Democratic Comm 467 Route 112 Patchogue, NY 11772	Print Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/10/00	\$500.00
Mr. Nicholas Leibham 1334 Riggs St NW Washington, DC 20009	Staff Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$1,071.11
Mr. Nicholas Leibham 1334 Riggs St NW Washington, DC 20009	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/00	\$2,387.00
Mr. Nicholas Leibham 1334 Riggs St NW Washington, DC 20009	Staff Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$143.00
Mr. Nicholas Leibham 1334 Riggs St NW Washington, DC 20009	Staff Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$211.50
Mr. Nicholas Leibham 1334 Riggs St NW Washington, DC 20009	Staff Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/10/00	\$145.17

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	\$5,192.34
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 8 OF 10  
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**Operating Expenditures**

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

**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00185241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Nicholas Leibham 1334 Riggs St NW Washington, DC 20008	Staff Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$260.33
B. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163	Bank Service Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/30/00	\$20.00
C. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163	Payroll Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/00	\$931.60
D. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163	Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$1,184.33
E. Full Name, Mailing Address and ZIP Code Citibank FSB P. O. Box 5870 Grand Central Sta New York, NY 10163	Bank Service Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/30/00	\$25.00
F. Full Name, Mailing Address and ZIP Code Joan Barnett 10 Lecluse Lane Huntington, NY 11743	Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/00	\$662.00
G. Full Name, Mailing Address and ZIP Code Jedd Moskowitz as Custodian for Petty Cash 7424 Miller Fall Rd Derwood, MD 20855	FUNDRAISING Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/8/00	\$500.00
H. Full Name, Mailing Address and ZIP Code Georgewood Florist 158-15 Northern Blvd Flushing, NY 11358	Flowers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/00	\$0.00
I. Full Name, Mailing Address and ZIP Code American Express P.O. Box 2853 New York, NY 10116	American Express (Platinum) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$300.00

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

\$3,863.26

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Operating Expenditures**

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**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period MEMO
American Express P.O. Box 2853 New York, NY 10116	Bank Service Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$300.00
B. Full Name, Mailing Address and ZIP Code American Express P.O. Box 2853 New York, NY 10116	Purpose of Disbursement American Express Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$2,149.51
C. Full Name, Mailing Address and ZIP Code Hunan Dynasty Pennsylvania Ave SE Washington, DC 20003	Purpose of Disbursement Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$204.70
D. Full Name, Mailing Address and ZIP Code Capitol Grille 601 Pennsylvania Ave NW Washington, DC	Purpose of Disbursement Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$247.64
E. Full Name, Mailing Address and ZIP Code King Yum 181-08 Union Tpke Fresh Meadows, NY	Purpose of Disbursement Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$52.40
F. Full Name, Mailing Address and ZIP Code Amtrak 50 Massachusetts Ave NE Washington, DC 20002	Purpose of Disbursement Cand. Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$382.00
G. Full Name, Mailing Address and ZIP Code Amtrak 50 Massachusetts Ave NE Washington, DC 20002	Purpose of Disbursement Cand. Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$118.00
H. Full Name, Mailing Address and ZIP Code Amtrak 50 Massachusetts Ave NE Washington, DC 20002	Purpose of Disbursement Cand. Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$191.00
I. Full Name, Mailing Address and ZIP Code American Express P.O. Box 2853 New York, NY 10116	Purpose of Disbursement American Express (Platinum) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$601.98

SUBTOTAL of Disbursements This Page (optional) .....	\$2,841.49
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Operating Expenditures**

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**NAME OF COMMITTEE (In Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period MEMO
King Yum 181-08 Union Tpke Fresh Meadows, NY	Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/00	\$57.32
B. Full Name, Mailing Address and ZIP Code Continental Airlines PO Box 4607 Houston, TX 77210	Cand. Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$284.50
C. Full Name, Mailing Address and ZIP Code American Express P.O. Box 2853 New York, NY 10118	American Express Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$143.90
D. Full Name, Mailing Address and ZIP Code Pier 25A Restuarant 215-16 Northern Blvd Bayside, NY 11361	Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$52.00
E. Full Name, Mailing Address and ZIP Code American Express P.O. Box 2853 New York, NY 10118	American Express (Platinum) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$1,478.61
F. Full Name, Mailing Address and ZIP Code US Airways 100 East 42nd St New York, NY 10017	Cand. Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$710.00
G. Full Name, Mailing Address and ZIP Code Hunan Dynasty Pennsylvania Ave SE Washington, DC 20003	Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$166.75
H. Full Name, Mailing Address and ZIP Code Pier 25A Restuarant 215-16 Northern Blvd Bayside, NY 11361	Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$50.40
I. Full Name, Mailing Address and ZIP Code Pier 25A Restuarant 215-16 Northern Blvd Bayside, NY 11361	Cand. Entertain (Fundraising) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$57.10

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>\$1,622.51</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>\$38,774.73</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Other Disbursements**

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**NAME OF COMMITTEE (in Full)**

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Israel for Congress 1968 Deer Park Ave Deer Park, NY 11729-	Contributions CD NY-02 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/28/00	\$2,000.00
B. Full Name, Mailing Address and ZIP Code Rush Holt for Congress PO Box 782 Pennington, NJ 08534	Contributions CD NJ-12 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Jefferson Democratic Club of Flushing 163-07 Depot Road Flushing, NY 11358	Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Eastern Queens Democratic Club P.O. Box 729 Flushing, NY 11362	Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/00	\$500.00
E. Full Name, Mailing Address and ZIP Code Nassau County Independence Party PO Box 132 Albertson, NY 11607	Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/00	\$250.00
F. Full Name, Mailing Address and ZIP Code Hoeffel for Congress 700 East Johnson Hwy Norristown, PA 19401-	Contributions PA13 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/00	\$1,000.00
G. Full Name, Mailing Address and ZIP Code Democratic Org. of Queens Cty. 72-50 Austin Street Forest Hills, NY 11375	Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/00	\$2,000.00
H. Full Name, Mailing Address and ZIP Code Working Families Party 88 3rd Ave Brooklyn, NY 11217-	Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/00	\$500.00
I. Full Name, Mailing Address and ZIP Code Friends Of Jim Maloney 240 Main Street Danbury, CT 06810	Contributions CD CT-05 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$1,000.00

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

\$9,250.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 21

Other Disbursements

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NAME OF COMMITTEE (in Full)

Committee to Elect Gary Ackerman C00165241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hills Hills Jewish Center 210-10 Union Turnpike Flushing, NY 11354	Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/23/00	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Bart Stupak for Congress PO Box 143 Menominee, MI 49858	Contributions CD MI-D1 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Anthony Weiner PO Box 345 Brooklyn, NY 11229	Contributions CD NY-09 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$1,000.00
D. Full Name, Mailing Address and ZIP Code LND Memorial Day Parade PO Box 639144 Little Neck, NY 11362	Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/10/00	\$230.00
E. Full Name, Mailing Address and ZIP Code Huntington Town Democratic Committee 44 Elm Street Huntington, NY 11743	Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/00	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

\$4,230.00

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

\$13,480.00



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

**Refunds of Contributions to PACs**

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

**NAME OF COMMITTEE (In Full)**  
 Committee to Elect Gary Ackerman C00185241

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E.G. PAC 21 Sweet Hollow Rd Huntington, NY 11743	Contrib. Refund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/00	\$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Committee to Elect Gary Ackerman C00185241				
<b>A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Georgewood Florist 158-15 Northern Blvd Flushing, NY 11358	\$0.00	\$419.10	\$0.00	\$419.10
<b>Nature of Debt (Purpose):</b> Flowers				
<b>B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Herf Jones P.O. Box 88501 Indianapolis, IN 46268	\$0.00	\$275.71	\$0.00	\$275.71
<b>Nature of Debt (Purpose):</b> Engraving				
<b>C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Inta-Boro Acres 88-19 101st Avenue Ozone Park, NY 11416	\$437.56	\$0.00	\$437.56	\$0.00
<b>Nature of Debt (Purpose):</b> Candidate Travel				
<b>D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Queens Tribune 174-15 Horace Harding Expressway Fresh Meadows, NY 11365	\$843.00	\$0.00	\$496.00	\$347.00
<b>Nature of Debt (Purpose):</b> Printing				
<b>E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Ben's Best Restaurant 96-40 Queens Blvd. Rego Park, NY 11374	\$0.00	\$209.85	\$0.00	\$209.85
<b>Nature of Debt (Purpose):</b>				
<b>F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Ben's Best Restaurant 96-40 Queens Blvd. Rego Park, NY 11374	\$715.33	\$0.00	\$0.00	\$715.33
<b>Nature of Debt (Purpose):</b> Catering				
<b>1) SUBTOTALS This Period This Page (optional)</b>				
<b>2) TOTALS This Period (last page in this line only)</b>				
<b>3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)</b>				
<b>4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)</b>				

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans


Page 2 of 2 for  
LINE NUMBER 10  
(Use separate schedule  
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Committee to Elect Gary Ackerman C00185241				
<b>A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b>				
Long Islander Newspaper Inc. 322 Main st Huntington, NY 11743	\$309.00	\$0.00	\$309.00	\$0.00
<b>Nature of Debt (Purpose):</b> Print Ads				
<b>B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b>				
Multi-Media Advertising 174-10 Horace Harding Expressway Fresh Meadows, NY 11365	\$9,165.87	\$0.00	\$0.00	\$9,165.87
<b>Nature of Debt (Purpose):</b> Printing				
<b>C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b>				
Inta-Boro Acres 88-19 101st Avenue Ozone Park, NY 11416	\$0.00	\$321.40	\$0.00	\$321.40
<b>Nature of Debt (Purpose):</b> Candidate Travel				
<b>D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b>				
<b>Nature of Debt (Purpose):</b>				
<b>E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b>				
<b>Nature of Debt (Purpose):</b>				
<b>F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b>				
<b>Nature of Debt (Purpose):</b>				
<b>1) SUBTOTALS This Period This Page (optional)</b>				
<b>2) TOTALS This Period (last page in this line only)</b>				\$11,454.26
<b>3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)</b>				\$0.00
<b>4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)</b>				\$11,454.26

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 7/15/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	7/15/00 DATE PREPARED