

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 196 West State Street
Check if different than previously reported. (ACC) Trenton NJ 08608

2. **FEC IDENTIFICATION NUMBER** C00104471
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day Post -Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 07 2006 in the State of NJ

5. Covering Period 10 19 2006 through 11 27 2006

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 Kiran R. Desai

Signature of Treasurer Electronically Filed by Kiran R. Desai Date 03 26 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
New Jersey Democratic State Committee

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		312387.98
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	1791117.75									
(c) Total Receipts (from Line 19)	1257974.62	5431564.54								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3049092.37	5743952.52								
7. Total Disbursements (from Line 31)	2846455.81	5541315.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	202636.56	202636.56								
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)	35036.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
New Jersey Democratic State Committee

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

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	99400.00	562950.00
(i) Itemized (use Schedule A)	650.00	2310.00
(ii) Unitemized	100050.00	565260.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	2100.00
(b) Political Party Committees	229000.00	411940.00
(c) Other Political Committees (such as PACs)	329050.00	979300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	868275.56	4035504.79
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	250.08	8019.98
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	60398.98	408739.77
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	60398.98	408739.77
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1257974.62	5431564.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1197575.64	5022824.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	14641.53	151907.87
(ii) Non-Federal Share.....	51058.86	524845.24
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	65700.39	676753.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	15000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	42762.23	42762.23
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	12350.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	2100.00	2100.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	2100.00	14450.00
29. Other Disbursements.....	0.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	2735893.19	4791850.62
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	2735893.19	4791850.62
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2846455.81	5541315.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	2795396.95	5016470.72

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	329050.00	979300.00
34. Total Contribution Refunds (from Line 28(d))	2100.00	14450.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	326950.00	964850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14641.53	151907.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	250.08	8019.98
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14391.45	143887.89

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 1881
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dennis R. Delellis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 2130 Deerfield Drive		Transaction ID: 11 ai-000029829	
City State Zip Code New Hope PA 18938		Amount of Each Receipt this Period 1200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Flooring			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Constantino Calinda		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 20 Cross street		Transaction ID: 11 ai-000029830	
City State Zip Code Madison NJ 07940		Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer New Windsor Development Co. Occupation Builder/Supervisor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Morris Gliklich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 8 Ballo Place		Transaction ID: 11 ai-000029831	
City State Zip Code Edison NJ 08820		Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional) ▶	3700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 1881
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eliseo Roques		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address Kings Court 54 Ashford Park10 A		Transaction ID: 11 ai-000029837	
City State Zip Code San Juan PR 00919		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Martinez Odell and Calabra Attorney at Law			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Andrew Manatos		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 6856 Tulip Hill Terrace		Transaction ID: 11 ai-000029838	
City State Zip Code Bethesda MD 20816		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Manatos and Manatos Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. Charis Lapas		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 1216 Ingleside Avenue		Transaction ID: 11 ai-000029839	
City State Zip Code McLean VA 22101		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation GP Homes Enterprises President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional) ▶	22000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 1881						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Advance Realty Development LLC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 1430 State Highway 206		Transaction ID: 11 ai-000029840	
City State Zip Code Bedminster NJ 07921	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		See Memo Items	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Peter Coccoziello		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 86 Old Farm Lane		Transaction ID: 11 ai-000029843	
City State Zip Code Oldwick NJ 08858	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Partner Share - Advance Realty Development LLC	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Elaine Adler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 910 Franklin Lakes Road		Transaction ID: 11 ai-000029868	
City State Zip Code Franklin Lakes NJ 07417	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 1881
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sokol, Behot, & Fiorenzo		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 433 Hackensack Avenue Continental Plaza		Transaction ID: 11 ai-000029870	
City Hackensack State NJ Zip Code 07601	Amount of Each Receipt this Period 4000.00		
FEC ID number of contributing federal political committee. C	See Memo Items		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Leon Sokol		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 2 Wadsworth Court		Transaction ID: 11 ai-000029950	
City Teaneck State NJ Zip Code 07666	Amount of Each Receipt this Period 4000.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM] Partner Share - Sokol, Behot, & Fiorenzo		
Name of Employer Sokol Behot & Fiorenzo Occupation Attorney	Aggregate Year-to-Date ▼ 5500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Alexander Sandoval		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 4900 Tassajara Road, Apartment 142		Transaction ID: 11 ai-000029939	
City Dublin State CA Zip Code 94568	Amount of Each Receipt this Period -5000.00		
FEC ID number of contributing federal political committee. C	NSF		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	-1000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 1881
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Dan Almeida

Mailing Address PO Box 443

City State Zip Code
Fords NJ 08863

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

Name of Employer Occupation
Self Employed Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: 11 ai-000029888

Amount of Each Receipt this Period
1500.00

Refund Pending

B. Full Name (Last, First, Middle Initial)
Michael A. Dannunzio

Mailing Address 136 Central Avenue

City State Zip Code
Clark NJ 07066

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

Name of Employer Occupation
Dan Car Associates Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: 11 ai-000029889

Amount of Each Receipt this Period
5000.00

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

Mailing Address 136 Terrace Avenue

City State Zip Code
Jersey City NJ 07307-4149

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

Name of Employer Occupation
NW Financial Group Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: 11 ai-000029890

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	11500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 1881
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Lawrence Lerner, Esq.

Mailing Address 600 South Avenue, West

City State Zip Code
Westfield NJ 07090-1404

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

Name of Employer Self Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 6

Transaction ID: 11 ai-000029891

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Paul Jacobson

Mailing Address 432 Pea Pond Road

City State Zip Code
Katonah NY 10536

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

Name of Employer Self Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 6

Transaction ID: 11 ai-000029893

Amount of Each Receipt this Period
10000.00

C. Full Name (Last, First, Middle Initial)
Nancy Yewaisis

Mailing Address 10 Debra Court

City State Zip Code
Scotch Plains NJ 07076

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

Name of Employer None Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 6

Transaction ID: 11 ai-000029906

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	16000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 1881
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Paul Hogan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 6	
Mailing Address 75 Valley View Avenue		Transaction ID: 11 ai-000029907	
City State Zip Code Summit NJ 07901	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Arthur E. Roswell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 6	
Mailing Address 137 Edgewood Drive		Transaction ID: 11 ai-000029934	
City State Zip Code Bridgewater NJ 08807	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer None Occupation Retired	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Elizabeth B. Roswell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 6	
Mailing Address 137 Edgewood Drive		Transaction ID: 11 ai-000029935	
City State Zip Code Bridgewater NJ 08807	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer None Occupation Retired	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 1881
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jerold L. Zaro		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 86 Wickapecko Drive		Transaction ID: 11 ai-000029910
City State Zip Code Ocean NJ 07712	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ansel Zaro Grimm and Aaron	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Krishan Gopal Puri		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 1100 Safa Street		Transaction ID: 11 ai-000029911
City State Zip Code Hemdon VA 20170	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Jack Rudin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 241 Central Park West		Transaction ID: 11 ai-000029912
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Rudin Management	Occupation Builder/Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 1881
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. M. Daniel Almeida		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address PO Box 443		Transaction ID: 11 ai-000029913	
City Fords	State NJ	Zip Code 08863	Amount of Each Receipt this Period 3500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Florida Grove Management	Occupation Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9775.00		

Full Name (Last, First, Middle Initial) B. Philip D. Murphy		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 45 Blossom Cove Road		Transaction ID: 11 ai-000029914	
City Red Bank	State NJ	Zip Code 07701	Amount of Each Receipt this Period 4700.00
FEC ID number of contributing federal political committee. C			
Name of Employer Goldman Sachs & Co.	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4700.00		

Full Name (Last, First, Middle Initial) C. Joseph R. Jingoli, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 3131 Princeton Pike		Transaction ID: 11 ai-000029920	
City Lawrenceville	State NJ	Zip Code 08648	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Jingoli & Sons Inc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional)	13200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 1881
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Gregory R. Valesi		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 6 Ella Drive		Transaction ID: 11 ai-000029923	
City Cream Ridge	State NJ	Amount of Each Receipt this Period 6000.00	
Zip Code 08514-2213		FEC ID number of contributing federal political committee. C	
Name of Employer CME Associates	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00		

B. Full Name (Last, First, Middle Initial) Gill & Chamas LLC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 100 West Pond Road PO Box 760		Transaction ID: 11 ai-000029925	
City Woodbridge	State NJ	Amount of Each Receipt this Period 1000.00	
Zip Code 07095		FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

See Memo Items

C. Full Name (Last, First, Middle Initial) Raymond A. Gill, Jr., Esq.		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 100 West Pond Road		Transaction ID: 11 ai-000029926	
City Woodbridge	State NJ	Amount of Each Receipt this Period 1000.00	
Zip Code 07095		FEC ID number of contributing federal political committee. C	
Name of Employer Gill & Chamas LLC	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

[MEMO ITEM]
Partner Share - Gill & Chamas LLC

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 1881
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph A. Panepinto		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 29 Victoria Lane		Transaction ID: 11 ai-000029931	
City Tenafly	State NJ	Zip Code 07670	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer PKG Associates LLC	Occupation Real Estate Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Andy Athens		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 400 North Main Street Suite 215		Transaction ID: 11 ai-000029933	
City Chicago	State IL	Zip Code 60610	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer United Hellenic Congress	Occupation General Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. Andy Athens		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 6	
Mailing Address 400 North Main Street Suite 215		Transaction ID: 11 ai-000029936	
City Chicago	State IL	Zip Code 60610	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer United Hellenic Congress	Occupation General Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	99400.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) National Air Traffic Controllers PAC Mailing Address City State Zip Code		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 6 Transaction ID: 11c-000029848 Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00238725 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

B. Full Name (Last, First, Middle Initial) Andrews For Congress Committee Mailing Address City State Zip Code		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 6 Transaction ID: 11c-000029851 Amount of Each Receipt this Period 100000.00
FEC ID number of contributing federal political committee. C C00243428 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 105000.00		Transfer

C. Full Name (Last, First, Middle Initial) Steve Rothman for Congress, Inc. Mailing Address P.O. Box 714 City State Zip Code Hackensack NJ 07601		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 6 Transaction ID: 11c-000029866 Amount of Each Receipt this Period 50000.00
FEC ID number of contributing federal political committee. C C00313494 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50200.00		Transfer

SUBTOTAL of Receipts This Page (optional)	▶	155000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 1881
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

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

Mailing Address 1630 Duke Street -, 4th, Floor

City State Zip Code
Alexandria VA 22314-3465

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 6

Transaction ID: 11c-000029867

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
United Water Inc. NJPAC

Mailing Address 200 Old Hook Road

City State Zip Code
Harrington Park NJ 07640

FEC ID number of contributing federal political committee. **C** C00280156

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 6

Transaction ID: 11c-000029871

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Emily's List

Mailing Address 1120 Connecticut Avenue NW Suite 1

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 11c-000029874

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **12000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 1881
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Exelon PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address PO Box 805379		Transaction ID: 11c-000029875	
City State Zip Code Chicago IL 60680		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00141218			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. United Transportation Union PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 14600 Detroit Ave.		Transaction ID: 11c-000029884	
City State Zip Code Cleveland OH 44107		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00001636			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. HILLPAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 1717 K Street, NW, Ste. 309B		Transaction ID: 11c-000029887	
City State Zip Code Washington DC 20036		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00363994			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 20 / 1881
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Forward Together PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 North Union Street
 Suite 350
 City State Zip Code
 Alexandria VA 22314
 FEC ID number of contributing federal political committee. **C** C00412791
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 6
Transaction ID: 11c-000029892
 Amount of Each Receipt this Period
 5000.00

B. Weston Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Connecticut Avenue
 North West Suit 1200
 City State Zip Code
 Washington DC 20036
 FEC ID number of contributing federal political committee. **C** C00251843
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 6
Transaction ID: 11c-000029915
 Amount of Each Receipt this Period
 1000.00

C. BrickLayers and Allied Craftworkers PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 Eye Street, NW
 City State Zip Code
 Washington DC 20006
 FEC ID number of contributing federal political committee. **C** C00003632
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 6
Transaction ID: 11c-000029916
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional) ► 11000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 21 / 1881
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Carpenters Legislative Improvement Commi

Mailing Address 101 Constituion Avenue NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 6

Transaction ID: 11c-000029917

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Amalgamated Transit Union Cope Account (ATU)

Mailing Address 5025 Wisconsin Ave, NW

City State Zip Code
Washington DC 20016-4139

FEC ID number of contributing federal political committee. **C** C00032995

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 6

Transaction ID: 11c-000029918

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Letter Carriers Political Education Comm

Mailing Address National Assoc. Of Letter Carriers
100 Indiana Avenue, NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 6

Transaction ID: 11c-000029919

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Weston Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 1001 Connecticut Avenue North West Suit 1200		Transaction ID: 11c-000029921	
City Washington State DC Zip Code 20036		Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C C00251843			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Pallone For Congress		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 473 Broadway		Transaction ID: 11c-000029924	
City Long Branch State NJ Zip Code 07740-3176		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. C C00226928			
Name of Employer Occupation		Transfer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. Machinists Non-Partisan Political League		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address Multi Candidate Committee General 9000 MacHinists Place		Transaction ID: 11c-000029927	
City Upper Marlboro State MD Zip Code 20772		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00002469			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	16500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 1881
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

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

Mailing Address 1505 Prince Street Suite 300

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 6

Transaction ID: 11c-000029928

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
American Postal Workers Union (APWU) PAC Fund

Mailing Address 1300 L Street

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 6

Transaction ID: 11c-000029929

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
BellSouth Employees' Georgia PAC

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C** C00174060

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 6

Transaction ID: 11c-000029930

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	229000.00

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

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

FOR LINE NUMBER: PAGE 24 / 1881
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1645228.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 6

Transaction ID: 12-01-03211-05242

Amount of Each Receipt this Period
12591.32

Joint Fundraising Transfer

B. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1745228.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 6

Transaction ID: 12-16-08520-08650

Amount of Each Receipt this Period
100000.00

Transfer from Affiliate

C. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1815228.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 12-16-08519-08649

Amount of Each Receipt this Period
70000.00

Transfer from Affiliate

SUBTOTAL of Receipts This Page (optional) ► **182591.32**

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

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

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

FOR LINE NUMBER: PAGE 25 / 1881
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1915228.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 12-16-08565-08695

Amount of Each Receipt this Period
100000.00

Transfer from Affiliate

B. Full Name (Last, First, Middle Initial)
Association of State Democratic Chairs

Mailing Address Dollars for Democrats
430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 6

Transaction ID: 12-01-03213-05244

Amount of Each Receipt this Period
115.40

Transfer from Affiliate

C. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2165228.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 6

Transaction ID: 12-16-08569-08699

Amount of Each Receipt this Period
250000.00

Transfer from Affiliate

SUBTOTAL of Receipts This Page (optional) ► **350115.40**

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

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

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

FOR LINE NUMBER: PAGE 26 / 1881
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2215228.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 12-16-08687-08820

Amount of Each Receipt this Period
50000.00

B. Full Name (Last, First, Middle Initial)
New Jersey Democratic Victory

Mailing Address 196 West State Street

City State Zip Code
Trenton NJ 08608

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
304025.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 12-22-00006-00006

Amount of Each Receipt this Period
144568.84

Joint Fundraising Transfer

C. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2271228.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 6

Transaction ID: 12-16-08612-08743

Amount of Each Receipt this Period
56000.00

Transfer from Affiliate

SUBTOTAL of Receipts This Page (optional) ► **250568.84**

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

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

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

FOR LINE NUMBER: PAGE 27 / 1881
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2281228.24

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 6

Transaction ID: 12-16-08628-08761

Amount of Each Receipt this Period
10000.00

Transfer from Affiliate

B. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2356228.24

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 6

Transaction ID: 12-16-08632-08765

Amount of Each Receipt this Period
75000.00

Transfer from Affiliate

C. Full Name (Last, First, Middle Initial)
Oscar M Cerna

Mailing Address 2 Grove Isle Drive

City State Zip Code
Coconut Grove FL 33133

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

Name of Employer Occupation
Cernar President

Receipt For: 2006 Primary General Other (specify) ▼
O2006 (NJDSC-D2)

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA12-M2-00000440

Amount of Each Receipt this Period
800.00

New Jersey Democratic Victory

[MEMO ITEM]
New Jersey Democratic Victory

SUBTOTAL of Receipts This Page (optional) ▶ **85000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jason C Cheng		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 1381 Route 1 South		Transaction ID: SA12-M2-000000423	
City Edison State NJ Zip Code 08837	Amount of Each Receipt this Period 400.00		New Jersey Democratic Vic-tory [MEMO ITEM] New Jersey Democratic Vic-tory
FEC ID number of contributing federal political committee. C			
Name of Employer Friendwell Corp Occupation President/CEO Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) B. Philip Christopher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 108 Fairway View Drive		Transaction ID: SA12-M2-000000417	
City Commack State NY Zip Code 11725	Amount of Each Receipt this Period 10000.00		New Jersey Democratic Vic-tory [MEMO ITEM] New Jersey Democratic Vic-tory
FEC ID number of contributing federal political committee. C			
Name of Employer Audiovox Inc. Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) C. D Gideon Cohen		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6	
Mailing Address 405 Silverside Road		Transaction ID: SA12-M2-000000412	
City Wilmington State DE Zip Code 19809	Amount of Each Receipt this Period 7900.00		New Jersey Democratic Vic-tory [MEMO ITEM] New Jersey Democratic Vic-tory
FEC ID number of contributing federal political committee. C			
Name of Employer The Bancorp Bank Occupation Chairman Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Leon Cooperman		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 45 Watchung Road		Transaction ID: SA12-M2-000000413	
City State Zip Code Short Hills NJ 07078	Amount of Each Receipt this Period 7900.00		
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Self Occupation Money Manager	[MEMO ITEM] New Jersey Democratic Victory		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) B. Lino A De Almeida Jr		Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2006	
Mailing Address 9 Professional Circle		Transaction ID: SA12-M2-000000420	
City State Zip Code Colts Neck NJ 07722	Amount of Each Receipt this Period 3900.00		
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Consolidated Construction Management S Occupation Contractor	[MEMO ITEM] New Jersey Democratic Victory		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) C. Nelson Ferreira		Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2006	
Mailing Address 31 Tannery Road		Transaction ID: SA12-M2-000000421	
City State Zip Code Branchburg NJ 08876	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Ferreira Construction Co Inc Occupation President/Owner	[MEMO ITEM] New Jersey Democratic Victory		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)	Aggregate Year-to-Date ▼ .00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph H Flom		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 4 Times Square		Transaction ID: SA12-M2-000000432	
City State Zip Code New York NY 10036		Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Skadden Arps Slate Meagher & Flom LLP Occupation Partner/Attorney		[MEMO ITEM] New Jersey Democratic Victory	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. L P Garipalli		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 11 Colts Gait Lane		Transaction ID: SA12-M2-000000424	
City State Zip Code Colts Neck NJ 07722		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Associates In Cardiology & Internal Me Occupation Physician		[MEMO ITEM] New Jersey Democratic Victory	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. Gary Green		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address 1 Harrowgate Drive		Transaction ID: SA12-M2-000000415	
City State Zip Code Cherry Hill NJ 08003		Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Archer & Greiner PC Occupation Attorney		[MEMO ITEM] New Jersey Democratic Victory	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ .00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Ravindranath Hajeebu Mailing Address 7 Hale Road City Burlington Townshi State NJ Zip Code 08016 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA12-M2-000000425 Amount of Each Receipt this Period <table border="1"> <tr> <td>400.00</td> </tr> </table> New Jersey Democratic Victory [MEMO ITEM] New Jersey Democratic Victory	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	7	/	2	0	0	6	400.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	1	7	/	2	0	0	6														
400.00																							
Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>	.00																				
.00																							

B. Full Name (Last, First, Middle Initial) Andrew Hohns Mailing Address 1933 Rodman Street City Philadelphia State PA Zip Code 19146 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA12-M2-000000418 Amount of Each Receipt this Period <table border="1"> <tr> <td>9900.00</td> </tr> </table> New Jersey Democratic Victory [MEMO ITEM] New Jersey Democratic Victory	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	6	/	2	0	0	6	9900.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	1	6	/	2	0	0	6														
9900.00																							
Name of Employer Occupation Cohen Brothers & Company Investment Banking Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>	.00																				
.00																							

C. Full Name (Last, First, Middle Initial) Alex Koshy Mailing Address 15 Honiss Place City Newark State NJ Zip Code 07104 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA12-M2-000000426 Amount of Each Receipt this Period <table border="1"> <tr> <td>800.00</td> </tr> </table> New Jersey Democratic Victory [MEMO ITEM] New Jersey Democratic Victory	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	7	/	2	0	0	6	800.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	1	7	/	2	0	0	6														
800.00																							
Name of Employer Occupation City of Newark Engineer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>	.00																				
.00																							

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vincent A Mai		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 50 Cornwall Lane		Transaction ID: SA12-M2-000000433	
City State Zip Code Port Washington NY 11050		Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Occupation AEA Investors Chairman/CEO		[MEMO ITEM] New Jersey Democratic Victory	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. Michael D McCarthy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 12 East 12th Street		Transaction ID: SA12-M2-000000441	
City State Zip Code New York NY 10003		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Occupation None Retired		[MEMO ITEM] New Jersey Democratic Victory	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. Emily Souvaine Meehan		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6	
Mailing Address 39 Broadway		Transaction ID: SA12-M2-000000414	
City State Zip Code New York NY 10006		Amount of Each Receipt this Period 9900.00	
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Occupation Souvaine Meehan Associates Consultant		[MEMO ITEM] New Jersey Democratic Victory	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)		Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Trigusen R Padi		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 26 Allison Court		Transaction ID: SA12-M2-000000427	
City State Zip Code Monmouth Junction NJ 08852	Amount of Each Receipt this Period 2900.00		
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer First American Associates	Occupation President/Owner		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]
New Jersey Democratic Victory

Full Name (Last, First, Middle Initial) B. Piyush J Patel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 54 Sycamore Street		Transaction ID: SA12-M2-000000428	
City State Zip Code Somerville NJ 08866	Amount of Each Receipt this Period 2900.00		
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer Summit Research	Occupation President/CEO		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]
New Jersey Democratic Victory

Full Name (Last, First, Middle Initial) C. Raj Rajaratnam		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 60 Sutton Place South		Transaction ID: SA12-M2-000000434	
City State Zip Code New York NY 10022	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C		New Jersey Democratic Victory	
Name of Employer The Galleon Group	Occupation Managing Director		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2)	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]
New Jersey Democratic Victory

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Parag Saxena Mailing Address 6 Timber Trail City Rye State NY Zip Code 10580 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 Transaction ID: SA12-M2-000000435 Amount of Each Receipt this Period 10000.00 New Jersey Democratic Victory [MEMO ITEM] New Jersey Democratic Victory
Name of Employer Capital Partners Occupation Founding Partner Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00		

B. Full Name (Last, First, Middle Initial) Philip R Sellinger Mailing Address 2 Old Glen Road City Morris Township State NJ Zip Code 07960 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 Transaction ID: SA12-M2-000000430 Amount of Each Receipt this Period 2100.00 New Jersey Democratic Victory [MEMO ITEM] New Jersey Democratic Victory
Name of Employer Greenberg & Traurig LLP Occupation Attorney Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00		

C. Full Name (Last, First, Middle Initial) H R Shah Mailing Address 12 Avalon Drive City Colonia State NJ Zip Code 07067 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 Transaction ID: SA12-M2-000000429 Amount of Each Receipt this Period 400.00 New Jersey Democratic Victory [MEMO ITEM] New Jersey Democratic Victory
Name of Employer TV Asia Occupation CEO Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 1881
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Kamal Shahid Mailing Address 24 Commerce Street City State Zip Code Newark NJ 07102 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 Transaction ID: SA12-M2-000000431 Amount of Each Receipt this Period 1000.00 New Jersey Democratic Vic-tory [MEMO ITEM] New Jersey Democratic Vic-tory
Name of Employer Occupation KS Engineers PC President Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00		

B. Full Name (Last, First, Middle Initial) Myron P Shevell Mailing Address 1-71 North Avenue East City State Zip Code Elizabeth NJ 07201 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 Transaction ID: SA12-M2-000000416 Amount of Each Receipt this Period 7900.00 New Jersey Democratic Vic-tory [MEMO ITEM] New Jersey Democratic Vic-tory
Name of Employer Occupation New England Motor Freight Inc Chairman/CEO Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00		

C. Full Name (Last, First, Middle Initial) Michael C Stanley Mailing Address PO Box 180 City State Zip Code Pottersville NJ 07979 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: SA12-M2-000000419 Amount of Each Receipt this Period 5000.00 New Jersey Democratic Vic-tory [MEMO ITEM] New Jersey Democratic Vic-tory
Name of Employer Occupation None Retired Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2006 (NJDSC-D2) Aggregate Year-to-Date ▼ .00		

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

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

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

FOR LINE NUMBER: PAGE 36 / 1881
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Kenneth I Starr

Mailing Address 350 Park Avenue

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Starr & Company LLC Managing Director

Receipt For: 2006
 Primary General
 Other (specify) ▼
 O2006 (NJDSC-D2)

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA12-M2-000000436

Amount of Each Receipt this Period
10000.00

New Jersey Democratic Vic-
tory

[MEMO ITEM]
New Jersey Democratic Vic-
tory

B. Full Name (Last, First, Middle Initial)
Kevin P Traenkle

Mailing Address 1107 Chautauqua Boulevard

City State Zip Code
Pacific Palisades CA 90272

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

Name of Employer Occupation
Colony Capital LLC Principal

Receipt For: 2006
 Primary General
 Other (specify) ▼
 O2006 (NJDSC-D2)

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA12-M2-000000437

Amount of Each Receipt this Period
10000.00

New Jersey Democratic Vic-
tory

[MEMO ITEM]
New Jersey Democratic Vic-
tory

C. Full Name (Last, First, Middle Initial)
Hank Uberoi

Mailing Address 321 Upper Mountain Avenue

City State Zip Code
Upper Montclair NJ 07043

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

Name of Employer Occupation
Self Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼
 O2006 (NJDSC-D2)

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA12-M2-000000438

Amount of Each Receipt this Period
4900.00

New Jersey Democratic Vic-
tory

[MEMO ITEM]
New Jersey Democratic Vic-
tory

SUBTOTAL of Receipts This Page (optional) ► **0.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 1881
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Albert S Waxman

Mailing Address 625 Avenuen of the Americas

City State Zip Code
New York NY 10011

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

Name of Employer Occupation
Psilos Group Senior Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼
 O2006 (NJDSC-D2)

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA12-M2-000000439

Amount of Each Receipt this Period
5400.00

New Jersey Democratic Vic-
tory

[MEMO ITEM]
New Jersey Democratic Vic-
tory

B. Full Name (Last, First, Middle Initial)
UA Pipefitters Local 274 PAC

Mailing Address 1000 Hendricks Causeway

City State Zip Code
Ridgefield NJ 07657

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

Name of Employer Occupation
C00190991 Qualified, Multi-Candidate PAC

Receipt For: 2006
 Primary General
 Other (specify) ▼
 O2006 (NJDSC-D2)

Aggregate Year-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: SA12-M2-000000422

Amount of Each Receipt this Period
1000.00

New Jersey Democratic Vic-
tory

[MEMO ITEM]
New Jersey Democratic Vic-
tory

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	868275.56

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 38 / 1881	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
State of New Jersey

Mailing Address Department of Treasury

City State Zip Code
Trenton NJ 08608

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.34

Date of Receipt

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

Transaction ID: 15-01-03401-05516

Amount of Each Receipt this Period
79.20

Overpayment - Payroll Taxes

SUBTOTAL of Receipts This Page (optional)	▶	79.20
TOTAL This Period (last page this line number only)	▶	79.20

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Linden City Democratic Club		Transaction ID: 28c-16-08490-08607 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address P.O. Box 1522		Amount of Each Disbursement this Period 2100.00	
City Linden	State NJ	Zip Code 07036	
Purpose of Disbursement Contribution Refund		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	2100.00
TOTAL This Period (last page this line number only)	▶	2100.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08690-08823
Mailing Address 150 West State Street		Date of Disbursement 10 / 19 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 30.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Tara Realty Group, LLC		Transaction ID: 30b-16-08488-08604
Mailing Address PO Box 452		Date of Disbursement 10 / 19 / 2006
City Ledgewood	State NJ	Zip Code 07852
Purpose of Disbursement Rent		Amount of Each Disbursement this Period 400.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Menendez for Senate Inc.		Transaction ID: 30b-16-08489-08605
Mailing Address 1100 Valley Brook Avenue, Suite 20		Date of Disbursement 10 / 19 / 2006
City Lyndhurst	State NJ	Zip Code 07071
Purpose of Disbursement Rent (Reimbursement)		Amount of Each Disbursement this Period 5681.66
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	6111.66
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Menendez for Senate Inc.		Transaction ID: 30b-16-08489-08606 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 1100 Valley Brook Avenue, Suite 20		Amount of Each Disbursement this Period 5681.67
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Rent (Reimbursement)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: 30b-16-08691-08824 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 30.00
City Trenton State NJ Zip Code 08608	Purpose of Disbursement Service Charge	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 30b-16-08692-08825 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 30.00
City Trenton State NJ Zip Code 08608	Purpose of Disbursement Service Charge	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5741.67
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 42 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08693-08826 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 30.00
City State Zip Code Trenton NJ 08608	Purpose of Disbursement Service Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: 30b-16-08701-08834 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 960.00
City State Zip Code Trenton NJ 08608	Purpose of Disbursement Fraudulent Account Activity Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 30b-16-08702-08835 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 940.00
City State Zip Code Trenton NJ 08608	Purpose of Disbursement Fraudulent Account Activity Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1930.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08703-08836
Mailing Address 150 West State Street		Date of Disbursement MM / DD / YYYY 10 / 19 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Fraudulent Account Activity	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 970.00	

Full Name (Last, First, Middle Initial) B. Message & Media		Transaction ID: 30b-16-08495-08612
Mailing Address 100 Albany Street		Date of Disbursement MM / DD / YYYY 10 / 20 / 2006
City New Brunswick	State NJ	Zip Code 08901
Purpose of Disbursement Printing Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 22470.00	

Full Name (Last, First, Middle Initial) C. United States Postal Service		Transaction ID: 30b-16-08497-08614
Mailing Address Kilmer SCF Bulk Mail Unit 21 Kilmer Road		Date of Disbursement MM / DD / YYYY 10 / 20 / 2006
City Edison	State NJ	Zip Code 08899
Purpose of Disbursement Postage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 45018.33	

SUBTOTAL of Disbursements This Page (optional)	68458.33
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. New Brunswick Electricians Club		Transaction ID: 30b-16-08499-08616
Mailing Address 1295 Livingston Avenue		Date of Disbursement 10 / 20 / 2006
City North Brunswick	State NJ	Zip Code 08902
Purpose of Disbursement Space Rental	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 350.00	

Full Name (Last, First, Middle Initial) B. Mario Arrieta		Transaction ID: 30b-21-00003-00003
Mailing Address 27 Pink Street		Date of Disbursement 10 / 20 / 2006
City Hackensack	State NJ	Zip Code 07601
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 80.00	

Full Name (Last, First, Middle Initial) C. Marciel Bastista		Transaction ID: 30b-21-00004-00004
Mailing Address 120 Sussex Street Apartment 180		Date of Disbursement 10 / 20 / 2006
City Hackensack	State NJ	Zip Code 07601
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 240.00	

SUBTOTAL of Disbursements This Page (optional)	670.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Russell Bravo Full Name (Last, First, Middle Initial) Mailing Address 655 Palisade Road City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00006-00006 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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B. Priscilla Caicedo Full Name (Last, First, Middle Initial) Mailing Address 710 Bergen Avenue City Fair Lawn State NJ Zip Code 07410 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00007-00007 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Angye Chima Full Name (Last, First, Middle Initial) Mailing Address 26 Pulaski Place City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00008-00008 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rocio Cobbs		Transaction ID: 30b-21-00009-00009 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 377 W Pleasantview Avenue, Apt 207		Amount of Each Disbursement this Period 420.00
City Hackensack State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael Cochiarella		Transaction ID: 30b-21-00010-00010 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 892 Hopson Street Apt 2		Amount of Each Disbursement this Period 170.00
City Union State NJ Zip Code 07083	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Triff Col		Transaction ID: 30b-21-00011-00011 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1620 Edmund Terrace		Amount of Each Disbursement this Period 130.00
City Union State NJ Zip Code 07083	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 47 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael Defelice Full Name (Last, First, Middle Initial) Mailing Address 20 Maiden Road City Little Ferry State NJ Zip Code 07643 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00012-00012 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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B. Enrico Domingo Full Name (Last, First, Middle Initial) Mailing Address 2139 Van Buren Place City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00013-00013 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 600.00 Category/Type
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C. Eugene Fernandez Full Name (Last, First, Middle Initial) Mailing Address 18 Park Avenue City Kearny State NJ Zip Code 07032 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00014-00014 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	930.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Esperanza Flores</p>		<p>Transaction ID: 30b-21-00015-00015 Date of Disbursement</p>	
<p>Mailing Address 26 Pulaski Place</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>	
<p>City Hackensack</p>	<p>State NJ</p>	<p>Zip Code 07601</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="336.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Man Han</p>		<p>Transaction ID: 30b-21-00017-00017 Date of Disbursement</p>	
<p>Mailing Address 17 Glen Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>	
<p>City Cliffside park</p>	<p>State NJ</p>	<p>Zip Code 07010</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="150.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Vlad Katsva</p>		<p>Transaction ID: 30b-21-00018-00018 Date of Disbursement</p>	
<p>Mailing Address 1-41 37th Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>	
<p>City Fair Lawn</p>	<p>State NJ</p>	<p>Zip Code 07410</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="348.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="834.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Teodor Kostadinov</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 28 Christina Street</p> <p>City Little Ferry State NJ Zip Code 07643</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00019-00019</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Brian Louvado</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 122 Tappan Street</p> <p>City Kearny State NJ Zip Code 07032</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00021-00021</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="140.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Kevin Lowry</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 8-64 Henderson Boulevard</p> <p>City Fair Lawn State NJ Zip Code 07601</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00022-00022</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="880.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Shelly Mack</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 22 Leving Street</p> <p>City South Hackensack State NJ Zip Code 07606</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00024-00024</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>B. Daniel Mastrangelo</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 459 Primrose Avenue</p> <p>City Oradell State NJ Zip Code 07649</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00025-00025</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>C. Francisco Melendez</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2101 Briarwood Lane</p> <p>City Union State NJ Zip Code 07083</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00026-00026</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="180.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="760.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Duban Moreno Full Name (Last, First, Middle Initial) Mailing Address 469 Jackson Avenue City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00027-00027 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 280.00 Category/Type
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B. Veronica Otalvaro Full Name (Last, First, Middle Initial) Mailing Address 240 Prospect Avenue City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00028-00028 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 330.00 Category/Type
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C. Renato Pagaduan Full Name (Last, First, Middle Initial) Mailing Address 2431 North 3rd Street City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00029-00029 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	710.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ruth Perez Full Name (Last, First, Middle Initial) Mailing Address 85 South State Street City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00030-00030 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 330.00 Category/Type
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B. Kevin Purn Full Name (Last, First, Middle Initial) Mailing Address 7 Marts Lane City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00031-00031 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 290.00 Category/Type
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C. Jayson Reyes Full Name (Last, First, Middle Initial) Mailing Address 2520 Leslie Street City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00032-00032 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cesar Rojas		Transaction ID: 30b-21-00033-00033 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 574 Olympia Avenue 2nd Floor		Amount of Each Disbursement this Period 180.00
City State Zip Code Cliffside Park NJ 07010	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Vanessa Rosario		Transaction ID: 30b-21-00034-00034 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 4 Marion Street		Amount of Each Disbursement this Period 290.00
City State Zip Code Hackensack NJ 07601	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tatiana Ruiz		Transaction ID: 30b-21-00035-00035 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1 Marion Street Apt 2		Amount of Each Disbursement this Period 290.00
City State Zip Code Hackensack NJ 07601	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	760.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aldrin Talaway		Transaction ID: 30b-21-00038-00038 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 794 Colonial Arms Road		Amount of Each Disbursement this Period 110.00
City Union State Zip Code NJ 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Eduardo Whitt		Transaction ID: 30b-21-00039-00039 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 2523 Standish Avenue		Amount of Each Disbursement this Period 260.00
City Union State Zip Code NJ 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Christine Winter		Transaction ID: 30b-21-00040-00040 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 165 Howard Avenue		Amount of Each Disbursement this Period 415.00
City Rochelle Park State Zip Code NJ 07662	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	785.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Britney Wyatt Full Name (Last, First, Middle Initial) Mailing Address 387 Creasant Drive City Franklin Lakes State NJ Zip Code 07417 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00041-00041 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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B. Beverly Ackles Full Name (Last, First, Middle Initial) Mailing Address 108 Wall Street City Burlington State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00042-00042 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
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C. Greg Ackles Full Name (Last, First, Middle Initial) Mailing Address 108 Wall Street City Burlington State NJ Zip Code 08016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00043-00043 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Threasa Ackles-Cope		Transaction ID: 30b-21-00044-00044 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 110 Wall Street		Amount of Each Disbursement this Period 40.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Thelma Allen		Transaction ID: 30b-21-00045-00045 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 11 Tillman Place		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Raafi Allgood		Transaction ID: 30b-21-00046-00046 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 64 Bolton Lane		Amount of Each Disbursement this Period 40.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maurice Anderson		Transaction ID: 30b-21-00047-00047 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 39 Country Club		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nathaniel Anderson		Transaction ID: 30b-21-00048-00048 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 39 Country Club		Amount of Each Disbursement this Period 400.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dionne Bolden		Transaction ID: 30b-21-00050-00050 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 18 Spiralwood Lane		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	560.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael Bolden Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00051-00051 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 18 Spiralwood Lane		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Denonisia Bradley Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00052-00052 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 10 Emerald Drive		Amount of Each Disbursement this Period 40.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Mikole Burke-Anderson Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00053-00053 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 39 Country Club		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Julian Corry		Transaction ID: 30b-21-00057-00057 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1010 Jarden Court		Amount of Each Disbursement this Period 40.00
City Burlington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Laticia Dunn		Transaction ID: 30b-21-00059-00059 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 10 Emerald Drive		Amount of Each Disbursement this Period 40.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tiffany Godfrey		Transaction ID: 30b-21-00060-00060 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 45 Northampton Drive		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Katrice Gray Full Name (Last, First, Middle Initial) Mailing Address 78 East Gate Lane City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00061-00061 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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B. Constance Hayes Full Name (Last, First, Middle Initial) Mailing Address 53 Melville Lane City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00062-00062 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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C. Chadwick Hooker Full Name (Last, First, Middle Initial) Mailing Address 99 Hillcrest Lane City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00063-00063 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Laura Hooker-Jackson Full Name (Last, First, Middle Initial) Mailing Address 99 Hillcrest Lane City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00064-00064 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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B. Michelle Hopson Full Name (Last, First, Middle Initial) Mailing Address 47 Maidstone Lane City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00065-00065 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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C. Walter Howard Jr. Full Name (Last, First, Middle Initial) Mailing Address 6 Indian Lane City Burlington State NJ Zip Code 08016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00066-00066 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Walter Howard		Transaction ID: 30b-21-00067-00067 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 8 Latmore		Amount of Each Disbursement this Period 40.00
City Burlington State NJ Zip Code 08016	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Vincent Jackson		Transaction ID: 30b-21-00068-00068 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 99 Hillcrest Lane		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Earl Johnson		Transaction ID: 30b-21-00069-00069 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 38 Gramercy Lane		Amount of Each Disbursement this Period 40.00
City Willingboro State NJ Zip Code 08046	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kenneth King Full Name (Last, First, Middle Initial) Mailing Address 13 Tremont Place City Willingboro State NJ Zip Code 08047 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00070-00070 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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B. Shawn Landers Full Name (Last, First, Middle Initial) Mailing Address 32 Bonnie Lane City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00071-00071 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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C. Monifa Moore Full Name (Last, First, Middle Initial) Mailing Address 19 Joel Court City Lindenwalled State NJ Zip Code 08201 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00072-00072 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Monica Moss		Transaction ID: 30b-21-00073-00073 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 39 Country Club Road		Amount of Each Disbursement this Period 80.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William Moss		Transaction ID: 30b-21-00074-00074 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 39 Country Club Road		Amount of Each Disbursement this Period 80.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Gail Murden		Transaction ID: 30b-21-00075-00075 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 12 Mafair Circle		Amount of Each Disbursement this Period 80.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Edward M. Murray		Transaction ID: 30b-21-00076-00076 Date of Disbursement 10 / 20 / 2006
Mailing Address 41 Endwell Lane		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Robert Purvey		Transaction ID: 30b-21-00077-00077 Date of Disbursement 10 / 20 / 2006
Mailing Address 47 Maidstone Lane		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Makeda Smith		Transaction ID: 30b-21-00080-00080 Date of Disbursement 10 / 20 / 2006
Mailing Address 146 Glenview Lane		Amount of Each Disbursement this Period 160.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	320.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Terry Thornton		Transaction ID: 30b-21-00083-00083
Mailing Address 17 Tallwood Lane		Date of Disbursement 10 / 20 / 2006
City Willingboro	State NJ	Zip Code 08046
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 40.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Karen Vann		Transaction ID: 30b-21-00086-00086
Mailing Address 44 Budhollow Lane		Date of Disbursement 10 / 20 / 2006
City Willingboro	State NJ	Zip Code 08046
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 80.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Joann Warner		Transaction ID: 30b-21-00088-00088
Mailing Address 19 Joel Court		Date of Disbursement 10 / 20 / 2006
City Lindenwold	State NJ	Zip Code 08021
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 80.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shannell Waters		Transaction ID: 30b-21-00089-00089 Date of Disbursement 10 / 20 / 2006
Mailing Address 39 Bradford Lane		Amount of Each Disbursement this Period 80.00
City Willingboro State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Muttalib Ahmadi		Transaction ID: 30b-21-00090-00090 Date of Disbursement 10 / 20 / 2006
Mailing Address 309 Baldwin Lane		Amount of Each Disbursement this Period 250.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Beaudelaire Alerte		Transaction ID: 30b-21-00091-00091 Date of Disbursement 10 / 20 / 2006
Mailing Address 136 South 13 Street		Amount of Each Disbursement this Period 300.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	630.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Denise Baskerville</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address A-10 Chestnut Avenue</p> <p>City Camden State NJ Zip Code 08103</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00092-00092</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Alanna Browne</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 118 South Chester Avenue</p> <p>City Pleasantville State NJ Zip Code 08232</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00093-00093</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Renee Bryant</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1217 South Octagon Road</p> <p>City Camden State NJ Zip Code 08104</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00094-00094</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="550.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Clayton		Transaction ID: 30b-21-00095-00095 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1142 Landowne Avenue		Amount of Each Disbursement this Period 150.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Thelma Coles		Transaction ID: 30b-21-00096-00096 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1278 Lakeshore Drive		Amount of Each Disbursement this Period 200.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Linda Crisdon		Transaction ID: 30b-21-00097-00097 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 500 North 7th Street		Amount of Each Disbursement this Period 150.00
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Marlen Diaz Full Name (Last, First, Middle Initial) Mailing Address 5530 Wayne Avenue City Pennsauken State NJ Zip Code 08110 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00098-00098 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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B. Marie Dunlap-Price Full Name (Last, First, Middle Initial) Mailing Address 1272 Magnolia Avenue City Camden State NJ Zip Code 08103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00099-00099 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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C. Sankeya English Full Name (Last, First, Middle Initial) Mailing Address 1230 Chestnut Street Apartment F City Camden State NJ Zip Code 08103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00100-00100 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Audrey Fergusson		Transaction ID: 30b-21-00101-00101 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 433 North 7th Street Apt 7T		Amount of Each Disbursement this Period 150.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gladys Gibbs		Transaction ID: 30b-21-00102-00102 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 326 Spruce Street		Amount of Each Disbursement this Period 150.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kim Grant		Transaction ID: 30b-21-00103-00103 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1579 Collins Avenue		Amount of Each Disbursement this Period 150.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vardalareise Green		Transaction ID: 30b-21-00104-00104 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 110 Columbia Drive		Amount of Each Disbursement this Period 200.00
City Atco State NJ Zip Code 08004	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kamile Kuntz		Transaction ID: 30b-21-00106-00106 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 408 Chambers Avenue		Amount of Each Disbursement this Period 200.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Isreal Laguer		Transaction ID: 30b-21-00107-00107 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 635 Vine Street		Amount of Each Disbursement this Period 250.00
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ashleen Lopez		Transaction ID: 30b-21-00108-00108 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1244 Browning Street		Amount of Each Disbursement this Period 150.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Cynthia Lucas		Transaction ID: 30b-21-00109-00109 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 714 Chestnut Street Apartment A-12		Amount of Each Disbursement this Period 150.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Matthew Walker		Transaction ID: 30b-21-00110-00110 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 102 Holly Street		Amount of Each Disbursement this Period 350.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rebecca Ware		Transaction ID: 30b-21-00111-00111 Date of Disbursement 10 / 20 / 2006	
Mailing Address 601 Ware Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bernadette Williams		Transaction ID: 30b-21-00112-00112 Date of Disbursement 10 / 20 / 2006	
Mailing Address 1118 Lake Shore Drive		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Patricia Williams		Transaction ID: 30b-21-00113-00113 Date of Disbursement 10 / 20 / 2006	
Mailing Address 44 Branch Village		Amount of Each Disbursement this Period 150.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	250.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Janeen Williams Full Name (Last, First, Middle Initial) Mailing Address 1066 Lake Shore Drive City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00114-00114 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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B. Elsie Albone Full Name (Last, First, Middle Initial) Mailing Address 880 Kearsley Road City Sicklerville State NJ Zip Code 08081 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00115-00115 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Joshua Bateman Full Name (Last, First, Middle Initial) Mailing Address 412 Broadway Avenue City Westville State NJ Zip Code 08093 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00117-00117 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 220.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lakesha Brown Full Name (Last, First, Middle Initial) Mailing Address C-13 Sycamore Court South City Camden State NJ Zip Code 08103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00119-00119 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 70.00 Category/Type
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B. Elizabeth Carmichael Full Name (Last, First, Middle Initial) Mailing Address 1801 Laurel Road Unit 201 City Lindenwold State NJ Zip Code 08021 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00120-00120 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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C. Nneka Carter Full Name (Last, First, Middle Initial) Mailing Address 154 Raritan Street City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00121-00121 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	290.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Connie DeLeon		Transaction ID: 30b-21-00123-00123 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 220.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Cristina DeLeon		Transaction ID: 30b-21-00124-00124 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 220.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kristen DiVenti		Transaction ID: 30b-21-00125-00125 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 33 Natur Lane		Amount of Each Disbursement this Period 200.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Judith Dutton		Transaction ID: 30b-21-00126-00126 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 195.00
City Franklinville State NJ Zip Code 08322	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michaline Ensign		Transaction ID: 30b-21-00127-00127 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 18 Hemlock Drive		Amount of Each Disbursement this Period 50.00
City Blenheim State NJ Zip Code 08012	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Marc Ferrier		Transaction ID: 30b-21-00128-00128 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1849 Cardinal Lake Drive		Amount of Each Disbursement this Period 310.00
City Cherry Hill State NJ Zip Code 08003	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	555.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Danielle Garcia		Transaction ID: 30b-21-00131-00131 Date of Disbursement 10 / 20 / 2006
Mailing Address 1141 Sheridan Avenue		Amount of Each Disbursement this Period 220.00
City Bellmawr State NJ Zip Code 08031	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Marc Garcia		Transaction ID: 30b-21-00132-00132 Date of Disbursement 10 / 20 / 2006
Mailing Address 311 North Elmwood Road		Amount of Each Disbursement this Period 170.00
City Marlton State NJ Zip Code 08053	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Dollie Gates		Transaction ID: 30b-21-00133-00133 Date of Disbursement 10 / 20 / 2006
Mailing Address 801 Cooper Landing Road		Amount of Each Disbursement this Period 300.00
City Cherry Hill State NJ Zip Code 08034	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	690.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) David Keller</p>		<p>Transaction ID: 30b-21-00136-00136 Date of Disbursement</p>
<p>Mailing Address 1 Hoot Owl Drive</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Sicklerville State NJ Zip Code 08081</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Kimberly Kern</p>		<p>Transaction ID: 30b-21-00137-00137 Date of Disbursement</p>
<p>Mailing Address 615 Walnut Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Laurel Springs State NJ Zip Code 08021</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Brian Kratky</p>		<p>Transaction ID: 30b-21-00138-00138 Date of Disbursement</p>
<p>Mailing Address 1268 Robinson Terrace</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Union State NJ Zip Code 07083</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="350.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gustave Lambert		Transaction ID: 30b-21-00139-00139 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address PO Box 143		Amount of Each Disbursement this Period 150.00
City State Zip Code Mauricetown NJ 08239	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kenatra Lee		Transaction ID: 30b-21-00141-00141 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1496 Louis Street		Amount of Each Disbursement this Period 200.00
City State Zip Code Camden NJ 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tamara G. Marsh		Transaction ID: 30b-21-00142-00142 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 3623 Fremont Avenue		Amount of Each Disbursement this Period 235.00
City State Zip Code Camden NJ 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	585.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shoshana Milovsky		Transaction ID: 30b-21-00144-00144 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1741 Frank Waldo Road		Amount of Each Disbursement this Period 50.00
City Waterford State NJ Zip Code 08089	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tammy Mitchell		Transaction ID: 30b-21-00145-00145 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 11 Greendale Road		Amount of Each Disbursement this Period 50.00
City Newton State NJ Zip Code 07860	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Juan Morillo		Transaction ID: 30b-21-00146-00146 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 5328 King Avenue		Amount of Each Disbursement this Period 150.00
City Pennsauken State NJ Zip Code 08109	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Monique Parker		Transaction ID: 30b-21-00147-00147 Date of Disbursement 10 / 20 / 2006
Mailing Address 411 East Gibbsboro Road, Apartment		Amount of Each Disbursement this Period 200.00
City Lindenwold State NJ Zip Code 08021	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Tim Pearson		Transaction ID: 30b-21-00148-00148 Date of Disbursement 10 / 20 / 2006
Mailing Address 1 Lexington Way		Amount of Each Disbursement this Period 100.00
City Erial State NJ Zip Code 08081	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. Jaideep Sen		Transaction ID: 30b-21-00149-00149 Date of Disbursement 10 / 20 / 2006
Mailing Address 63 Bunning Drive		Amount of Each Disbursement this Period 255.00
City Voorhees State NJ Zip Code 08043	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	555.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Zinnia Sharpe		Transaction ID: 30b-21-00150-00150 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 535 MacKinet Way		Amount of Each Disbursement this Period 200.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Daniel Wright		Transaction ID: 30b-21-00151-00151 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 862 Longwood Circle		Amount of Each Disbursement this Period 230.00
City Haddonfield State NJ Zip Code 08033	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Matthew Zinader		Transaction ID: 30b-21-00152-00152 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 404 Fernwood Avenue		Amount of Each Disbursement this Period 675.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1105.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Martha Abraham		Transaction ID: 30b-21-00153-00153 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 295 Woodside Avenue		Amount of Each Disbursement this Period 135.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Yasmin Acevedo		Transaction ID: 30b-21-00154-00154 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 780 Broadway, Apartment BD		Amount of Each Disbursement this Period 295.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Anibal Alcantara		Transaction ID: 30b-21-00155-00155 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 15 Heller Parkway		Amount of Each Disbursement this Period 105.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	535.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Mildred Allen Full Name (Last, First, Middle Initial) Mailing Address 614 N. 5th Street City Newark State NJ Zip Code 07107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00156-00156 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 60.00 Category/Type
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B. Pedro Aquino Full Name (Last, First, Middle Initial) Mailing Address 277 Little Street City Belleville State NJ Zip Code 07109 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00157-00157 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 150.00 Category/Type
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C. Anthony Arenas Full Name (Last, First, Middle Initial) Mailing Address 74 Kearny Street City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00158-00158 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	310.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Khalif Ball Full Name (Last, First, Middle Initial) Mailing Address 148 Tuxedo Parkway City Newark State NJ Zip Code 07106 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00159-00159 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 140.00 Category/Type
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B. Javier Caicedo Full Name (Last, First, Middle Initial) Mailing Address 127 Sylvan Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00160-00160 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 110.00 Category/Type
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C. Rebecca Colon Full Name (Last, First, Middle Initial) Mailing Address 4 Copper Place City Belleville State NJ Zip Code 07109 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00163-00163 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 265.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	515.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angel Colon		Transaction ID: 30b-21-00164-00164 Date of Disbursement 10 / 20 / 2006	
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 345.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rafael Concepcion, Jr.		Transaction ID: 30b-21-00165-00165 Date of Disbursement 10 / 20 / 2006	
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 130.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Darlene Cooper		Transaction ID: 30b-21-00166-00166 Date of Disbursement 10 / 20 / 2006	
Mailing Address 11 Carey Court		Amount of Each Disbursement this Period 210.00	
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	685.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yesenia B. Cruz		Transaction ID: 30b-21-00167-00167 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 330 Mt. Prospect Avenue		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Dioseni Del Jesus		Transaction ID: 30b-21-00168-00168 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 272 Park Avenue		Amount of Each Disbursement this Period 180.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Milton Duran		Transaction ID: 30b-21-00169-00169 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 525.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	755.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anthony Fullenwider		Transaction ID: 30b-21-00170-00170 Date of Disbursement 10 / 20 / 2006
Mailing Address 53 Hockman Place		Amount of Each Disbursement this Period 170.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Wanda Garcia		Transaction ID: 30b-21-00171-00171 Date of Disbursement 10 / 20 / 2006
Mailing Address 432 N. 7th Street		Amount of Each Disbursement this Period 180.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Farhan Kamal		Transaction ID: 30b-21-00174-00174 Date of Disbursement 10 / 20 / 2006
Mailing Address 196 Harrison Avenue		Amount of Each Disbursement this Period 160.00
City Harrison State NJ Zip Code 07029	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	510.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Stephen Maisonave Full Name (Last, First, Middle Initial) Mailing Address 107 N. 10th Street City Newark State NJ Zip Code 07107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00175-00175 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 145.00 Category/Type
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B. Tiffany Maldonado Full Name (Last, First, Middle Initial) Mailing Address 57 Chester Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00176-00176 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 105.00 Category/Type
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C. Jonathan Mattos Full Name (Last, First, Middle Initial) Mailing Address 15-17 Halleck Street City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00177-00177 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 105.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	355.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Javer Morales		Transaction ID: 30b-21-00179-00179 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 40 West Kinney Street		Amount of Each Disbursement this Period 165.00
City Newark State NJ Zip Code 07102	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Melina P. Moreno		Transaction ID: 30b-21-00180-00180 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 498 N. 4th Street		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Carmen Ocasio		Transaction ID: 30b-21-00181-00181 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 265.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	530.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jose Ortiz		Transaction ID: 30b-21-00182-00182 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 127 N. 15th Street		Amount of Each Disbursement this Period 85.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. John Patino		Transaction ID: 30b-21-00184-00184 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 641 North 9th Street		Amount of Each Disbursement this Period 525.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Melissa Polanco		Transaction ID: 30b-21-00185-00185 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 243 Broad Street		Amount of Each Disbursement this Period 160.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Edwin Ramos		Transaction ID: 30b-21-00187-00187 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 532 Broadway Street		Amount of Each Disbursement this Period 160.00
City Newark State NJ Zip Code 07104		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Oscar Rodriguez		Transaction ID: 30b-21-00190-00190 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 307 Highland Avenue		Amount of Each Disbursement this Period 240.00
City Newark State NJ Zip Code 07104		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Marco Rodriguez		Transaction ID: 30b-21-00191-00191 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 307 Highland Avenue		Amount of Each Disbursement this Period 270.00
City Newark State NJ Zip Code 07104		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ashley Romero		Transaction ID: 30b-21-00192-00192 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 73 Bellair Place		Amount of Each Disbursement this Period 140.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sorinette Rosario		Transaction ID: 30b-21-00193-00193 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 345.00
City Belleville State NJ Zip Code 07109	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Antonio Santana		Transaction ID: 30b-21-00194-00194 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 300 Woodside Avenue		Amount of Each Disbursement this Period 330.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	815.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Elsa Soto		Transaction ID: 30b-21-00195-00195 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 356 Union Avenue		Amount of Each Disbursement this Period 265.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lisset Vasquez		Transaction ID: 30b-21-00196-00196 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 283 Lake Street		Amount of Each Disbursement this Period 160.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Alaji Ali		Transaction ID: 30b-21-00197-00197 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 142 Main Street Apt. 1		Amount of Each Disbursement this Period 170.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	595.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Scotty Ansong		Transaction ID: 30b-21-00198-00198 Date of Disbursement 10 / 20 / 2006	
Mailing Address 131 Washington Street		Amount of Each Disbursement this Period 170.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Louis Antenor		Transaction ID: 30b-21-00199-00199 Date of Disbursement 10 / 20 / 2006	
Mailing Address 46 Lorelei Road		Amount of Each Disbursement this Period 100.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Adam Arena		Transaction ID: 30b-21-00200-00200 Date of Disbursement 10 / 20 / 2006	
Mailing Address 18 Park Drive South 1st Floor		Amount of Each Disbursement this Period 220.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	490.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Axelrod		Transaction ID: 30b-21-00201-00201 Date of Disbursement 10 / 20 / 2006	
Mailing Address 14 Seaman Road		Amount of Each Disbursement this Period 130.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Claudeen Benoit		Transaction ID: 30b-21-00202-00202 Date of Disbursement 10 / 20 / 2006	
Mailing Address 10 North Kowain Place		Amount of Each Disbursement this Period 50.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Abdus Bey		Transaction ID: 30b-21-00203-00203 Date of Disbursement 10 / 20 / 2006	
Mailing Address 144 South Valley Road		Amount of Each Disbursement this Period 50.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	230.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ron Botelho Full Name (Last, First, Middle Initial) Mailing Address 7 Woodhull Avenue City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00204-00204 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 312.00 Category/Type
--	--	---

B. Stephanie Brown Full Name (Last, First, Middle Initial) Mailing Address 24 East Korwel Circle City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00205-00205 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 20.00 Category/Type
--	--	--

C. Angelica Burton Full Name (Last, First, Middle Initial) Mailing Address 26 Kling Street City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00206-00206 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 20.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	352.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Malachi Cameron		Transaction ID: 30b-21-00207-00207 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 9 Freeman Street Apt. 3R		Amount of Each Disbursement this Period 170.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. George Carrero		Transaction ID: 30b-21-00208-00208 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 26 Ella Street		Amount of Each Disbursement this Period 70.00
City Bloomfield State NJ Zip Code 07003		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Jerry Chapusette		Transaction ID: 30b-21-00209-00209 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 36 Warsessing Avenue		Amount of Each Disbursement this Period 150.00
City Bloomfield State NJ Zip Code 07003		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	390.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eva Cirilo		Transaction ID: 30b-21-00210-00210 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 5809 Hudson Avenue		Amount of Each Disbursement this Period 100.00
City West New York State NJ Zip Code 07093		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Henry De Koninck		Transaction ID: 30b-21-00211-00211 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 625.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gardy Denis		Transaction ID: 30b-21-00212-00212 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 59 Whittlesey Avenue		Amount of Each Disbursement this Period 170.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	895.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Nick Dominguez</p>		<p>Transaction ID: 30b-21-00215-00215 Date of Disbursement</p>
<p>Mailing Address 79 Ann Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City Newark State NJ Zip Code 07105</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="170.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Christopher Echeverria</p>		<p>Transaction ID: 30b-21-00216-00216 Date of Disbursement</p>
<p>Mailing Address 11 Webber Road</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City West Orange State NJ Zip Code 07052</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="170.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Danielle Elizaire</p>		<p>Transaction ID: 30b-21-00218-00218 Date of Disbursement</p>
<p>Mailing Address 86 Ridge Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City West Orange State NJ Zip Code 07052</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="70.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="410.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Syieda Ellison		Transaction ID: 30b-21-00220-00220 Date of Disbursement 10 / 20 / 2006	
Mailing Address 573 Morris Street		Amount of Each Disbursement this Period 150.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Esqueree		Transaction ID: 30b-21-00221-00221 Date of Disbursement 10 / 20 / 2006	
Mailing Address 181 Mitchell Street		Amount of Each Disbursement this Period 170.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Larissa Folk		Transaction ID: 30b-21-00222-00222 Date of Disbursement 10 / 20 / 2006	
Mailing Address PO Box 1067		Amount of Each Disbursement this Period 220.00	
City Maplewood State NJ Zip Code 07040	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Beatrice Gonzalez		Transaction ID: 30b-21-00223-00223 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 203 Watchung Avenue Apt 2		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Naomi Gonzalez		Transaction ID: 30b-21-00224-00224 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 203 Watchung Avenue		Amount of Each Disbursement this Period 250.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mario Gutierrez		Transaction ID: 30b-21-00225-00225 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 137 High Street		Amount of Each Disbursement this Period 20.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Donald Kraszewski		Transaction ID: 30b-21-00227-00227 Date of Disbursement 10 / 20 / 2006
Mailing Address 7 Jefferson Street		Amount of Each Disbursement this Period 130.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kaitlin Lewis		Transaction ID: 30b-21-00229-00229 Date of Disbursement 10 / 20 / 2006
Mailing Address 39 Hughes Place		Amount of Each Disbursement this Period 150.00
City Little Falls State NJ Zip Code 07424	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tramaine Marwino		Transaction ID: 30b-21-00231-00231 Date of Disbursement 10 / 20 / 2006
Mailing Address 53 Elm Street		Amount of Each Disbursement this Period 170.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sydell Mejia		Transaction ID: 30b-21-00232-00232 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 89 Watchung Avenue		Amount of Each Disbursement this Period 170.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jean Napoleon		Transaction ID: 30b-21-00233-00233 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 35 Watssesing Avenue		Amount of Each Disbursement this Period 200.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Joaner Napoleon		Transaction ID: 30b-21-00234-00234 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 35 Watssesing Avenue		Amount of Each Disbursement this Period 220.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	590.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rick Pierre-Philipp		Transaction ID: 30b-21-00235-00235 Date of Disbursement 10 / 20 / 2006	
Mailing Address 152 South Valley Road		Amount of Each Disbursement this Period 100.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Theo Pollack		Transaction ID: 30b-21-00236-00236 Date of Disbursement 10 / 20 / 2006	
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 500.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Adrianna Rockford		Transaction ID: 30b-21-00237-00237 Date of Disbursement 10 / 20 / 2006	
Mailing Address 112 Ray Street		Amount of Each Disbursement this Period 120.00	
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Beatrice Sangosse		Transaction ID: 30b-21-00238-00238 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 57 Highwood Road		Amount of Each Disbursement this Period 50.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Cassi Simmons		Transaction ID: 30b-21-00240-00240 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 47 Freeman Street		Amount of Each Disbursement this Period 50.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Asia Stanislaus		Transaction ID: 30b-21-00241-00241 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 58 Terrace Avenue		Amount of Each Disbursement this Period 180.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michelle Sydney		Transaction ID: 30b-21-00242-00242 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 17 Dodd Street Avenue		Amount of Each Disbursement this Period 120.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ryan Tice		Transaction ID: 30b-21-00244-00244 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 151 Prospect Avenue, Apartment 6F		Amount of Each Disbursement this Period 500.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sarah Wesley		Transaction ID: 30b-21-00245-00245 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 9 Valley Way		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anthony Wiltshire		Transaction ID: 30b-21-00246-00246 Date of Disbursement 10 / 20 / 2006
Mailing Address 128 Hillyer Street		Amount of Each Disbursement this Period 285.00
City East Orange	State NJ	
Zip Code 07017		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Stephen Wisner		Transaction ID: 30b-21-00247-00247 Date of Disbursement 10 / 20 / 2006
Mailing Address 25 North Terrace		Amount of Each Disbursement this Period 300.00
City Maplewood	State NJ	
Zip Code 07040		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Natalie Agboyibar		Transaction ID: 30b-21-00248-00248 Date of Disbursement 10 / 20 / 2006
Mailing Address 64 Tensaw Drive		Amount of Each Disbursement this Period 150.00
City Browns Mills	State NJ	
Zip Code 08015		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	735.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Karen Badie</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 520 Collings Avenue Apartment 403B</p> <p>City Collingswood State NJ Zip Code 08017</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-00250-00250</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="170.00"/></p>
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<p>B. Cherell Briggs</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 101 S Walter Avenue</p> <p>City Trenton State NJ Zip Code 08609</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-00251-00251</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
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<p>C. Karyn Coles</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 36 Arrowwood Court</p> <p>City Deptford State NJ Zip Code 08096</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-00256-00256</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="270.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jennifer Cummings Full Name (Last, First, Middle Initial) Mailing Address 67 Hancock Avenue Apartment 2 City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00257-00257 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 50.00
B. Tarr Harris Full Name (Last, First, Middle Initial) Mailing Address 200 Mullica Hill Road City Glassboro State NJ Zip Code 08028 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00262-00262 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 270.00
C. Brian Kratky Full Name (Last, First, Middle Initial) Mailing Address 1268 Robinson Terrace City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00264-00264 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 70.00

SUBTOTAL of Disbursements This Page (optional)	390.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Tashell Martin</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 8 Exton Lane</p> <p>City Willingboro State NJ Zip Code 08046</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00265-00265</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Dru Mealing</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 485 Cary Street</p> <p>City Orange State NJ Zip Code 07050</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00266-00266</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Tammy Mitchell</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 11 Greendale Road</p> <p>City Newton State NJ Zip Code 07860</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-00268-00268</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="70.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="320.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Maraud Pemberton Full Name (Last, First, Middle Initial) Mailing Address 26 Joseph Drive City Sewell State NJ Zip Code 08080 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00270-00270 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Amaresh Vidyarthi Full Name (Last, First, Middle Initial) Mailing Address 33 Charles Street City Carteret State NJ Zip Code 07008 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00276-00276 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Brendan Cassidy Full Name (Last, First, Middle Initial) Mailing Address 122 Huntington Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00278-00278 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 290.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kevin Fortkiewicz Full Name (Last, First, Middle Initial) Mailing Address 16 Clover Lane City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00279-00279 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 170.00 Category/Type
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B. Ruwhiy Barrow Full Name (Last, First, Middle Initial) Mailing Address 218 Fulton Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00281-00281 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Kevin Diggs Full Name (Last, First, Middle Initial) Mailing Address 49 Clinton Avenue City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00283-00283 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. James Diggs		Transaction ID: 30b-21-00284-00284 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 62 Rutgers Avenue		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Thomasina Dunton		Transaction ID: 30b-21-00285-00285 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 51 Grant Avenue 2nd Floor		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lissette Ferreiro		Transaction ID: 30b-21-00286-00286 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 126 Paulison Avenue		Amount of Each Disbursement this Period 560.00
City Ridgefield Park State NJ Zip Code 07660	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1010.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sherri Fletcher		Transaction ID: 30b-21-00287-00287 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 230 West 5th Avenue		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Roland Goodson		Transaction ID: 30b-21-00288-00288 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 310 South Harrison Street		Amount of Each Disbursement this Period 230.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Dion Hardee		Transaction ID: 30b-21-00289-00289 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 218 Duncan Avenue		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	680.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tiona Hawkins		Transaction ID: 30b-21-00290-00290 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 164 Streetegman Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Malcolm Inman		Transaction ID: 30b-21-00291-00291 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 64 Storm Avenue		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Javier		Transaction ID: 30b-21-00292-00292 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 205 Monticello Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Miriam Kelly		Transaction ID: 30b-21-00293-00293 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 24 Rutgers Avenue		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Yvette Manning		Transaction ID: 30b-21-00295-00295 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 34 Bleeker Street		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Roosevelt McKinnie		Transaction ID: 30b-21-00296-00296 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 149 Claremont Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Warren McKnight		Transaction ID: 30b-21-00297-00297 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 721 Grand Street		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Chartryce Mullins		Transaction ID: 30b-21-00298-00298 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 134 Van Norstrand Avenue 2nd Floor		Amount of Each Disbursement this Period 135.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Fuquan Mutalib		Transaction ID: 30b-21-00299-00299 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 7 Center Way		Amount of Each Disbursement this Period 200.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	485.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Deborah Norwood		Transaction ID: 30b-21-00300-00300 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 250.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Jeanette Nunez		Transaction ID: 30b-21-00301-00301 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 190 VanNostrand Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Nicolas Ortiz		Transaction ID: 30b-21-00302-00302 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 619 Grove Street		Amount of Each Disbursement this Period 180.00
City Jersey City State NJ Zip Code 07310	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Walter Payton		Transaction ID: 30b-21-00303-00303 Date of Disbursement 10 / 20 / 2006
Mailing Address 391 Forrest Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. James Perez		Transaction ID: 30b-21-00304-00304 Date of Disbursement 10 / 20 / 2006
Mailing Address 230 Pine Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07304	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Frederick Phelps		Transaction ID: 30b-21-00305-00305 Date of Disbursement 10 / 20 / 2006
Mailing Address 153 Myrtle Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joyce Praylow		Transaction ID: 30b-21-00306-00306 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 62 Rutgers Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Natasha Reed		Transaction ID: 30b-21-00307-00307 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 163 Bidwell Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07304		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Stephon Reeves		Transaction ID: 30b-21-00308-00308 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 145 Dwight Street		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jacklyn Richardson Full Name (Last, First, Middle Initial) Mailing Address 346 Princeton Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00309-00309 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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B. Kenneth Rowe Full Name (Last, First, Middle Initial) Mailing Address 61 North Arlington Avenue City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00310-00310 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Paul Sinclair Full Name (Last, First, Middle Initial) Mailing Address 55 Atlantic Ave City Jersey City State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00311-00311 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 180.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. R Wali Sloan		Transaction ID: 30b-21-00312-00312 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 5 Whitney Place Apt 22		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Markee Smith		Transaction ID: 30b-21-00313-00313 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 112 Bostwick Avenue		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Eugene Streeter		Transaction ID: 30b-21-00314-00314 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 143 Fulton Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Yasheida Taylor Full Name (Last, First, Middle Initial) Mailing Address 754 Communipaw Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00315-00315 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Nyeisha Thompson Full Name (Last, First, Middle Initial) Mailing Address 240 Clerk Street City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00316-00316 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 205.00 Category/Type
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C. Dawn Thornton Full Name (Last, First, Middle Initial) Mailing Address 1 Waterview Drive City Lakewood State NJ Zip Code 08701 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00317-00317 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	705.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Eric Turkowski Full Name (Last, First, Middle Initial) Mailing Address 59 54th Street City West New York State NJ Zip Code 07093 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00318-00318 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 560.00 Category/Type
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B. Latvia Waldron Full Name (Last, First, Middle Initial) Mailing Address 112 Bostwick Ave City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00319-00319 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Tyrell Watford Full Name (Last, First, Middle Initial) Mailing Address 30 Stevens Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00320-00320 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	760.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. James Watson Full Name (Last, First, Middle Initial) Mailing Address 74 Garoadner Street. City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00321-00321 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Maurice Watson Full Name (Last, First, Middle Initial) Mailing Address 1866 JFK Boulevard City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00322-00322 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Hakim Williams Full Name (Last, First, Middle Initial) Mailing Address 80 High Street City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00323-00323 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Halima Williams</p>		<p>Transaction ID: 30b-21-00324-00324 Date of Disbursement</p>
<p>Mailing Address 211 Orange Road</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City State Zip Code Montclair NJ 07042</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Janice Williams</p>		<p>Transaction ID: 30b-21-00325-00325 Date of Disbursement</p>
<p>Mailing Address 80 High Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City State Zip Code East Orange NJ 07017</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Linda Williams</p>		<p>Transaction ID: 30b-21-00326-00326 Date of Disbursement</p>
<p>Mailing Address 22 Belmont Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City State Zip Code Jersey City NJ 07304</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="650.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Javier Arroyo Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00327-00327 Date of Disbursement: 10 / 20 / 2006
Mailing Address 100 Montgomery Street Apartment 15		Amount of Each Disbursement this Period 390.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B. Jessica Brodie Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00328-00328 Date of Disbursement: 10 / 20 / 2006
Mailing Address 36 Highland Avenue		Amount of Each Disbursement this Period 315.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C. Erick Camacho Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00329-00329 Date of Disbursement: 10 / 20 / 2006
Mailing Address 100 Montgomery Street Apt 24C		Amount of Each Disbursement this Period 290.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	995.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Jose Camacho</p>		<p>Transaction ID: 30b-21-00330-00330 Date of Disbursement</p>
<p>Mailing Address 16 David Court</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Dayton State NJ Zip Code 08810</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Ysabel Hernandez</p>		<p>Transaction ID: 30b-21-00823-00823 Date of Disbursement</p>
<p>Mailing Address 293 Paulison Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Passaic State NJ Zip Code 07055</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Samuel Holguin</p>		<p>Transaction ID: 30b-21-00824-00824 Date of Disbursement</p>
<p>Mailing Address 106 Sherman Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Passaic State NJ Zip Code 07055</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="700.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Frank Lantigua Full Name (Last, First, Middle Initial) Mailing Address 7-9 3rd Street, Apartment 4 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00825-00825 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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B. Johnny Martinez Full Name (Last, First, Middle Initial) Mailing Address 204 President Street #220 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00826-00826 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Sabrina Martinez Full Name (Last, First, Middle Initial) Mailing Address 18 Federal Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00827-00827 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lully Mendez Full Name (Last, First, Middle Initial) Mailing Address 27 Ann Street, Apartment 6 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00828-00828 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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B. Fior Menier Full Name (Last, First, Middle Initial) Mailing Address 498 Boulevard City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00829-00829 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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C. Russell Milligan Full Name (Last, First, Middle Initial) Mailing Address 24 State Street, Apartment 2C City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00830-00830 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juan Carlos Mota Full Name (Last, First, Middle Initial) Mailing Address 233 Monroe Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00831-00831 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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B. Felix Nunez Full Name (Last, First, Middle Initial) Mailing Address 60 Jackson Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00832-00832 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. ISMEL PENA Full Name (Last, First, Middle Initial) Mailing Address 230 3rd Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00833-00833 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yerly Perdomo		Transaction ID: 30b-21-00834-00834 Date of Disbursement 10 / 20 / 2006
Mailing Address 18 Federal Street		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Angel Perez		Transaction ID: 30b-21-00835-00835 Date of Disbursement 10 / 20 / 2006
Mailing Address 58 Howe Avenue, Apartment 15		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Keny Perez		Transaction ID: 30b-21-00836-00836 Date of Disbursement 10 / 20 / 2006
Mailing Address 99 Gregory Avenue, Apartment A-2		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Diana Polanco		Transaction ID: 30b-21-00837-00837 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 32 Myrtle Avenue, Apartment 5		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ely Polanco		Transaction ID: 30b-21-00838-00838 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 242 Totowa Road		Amount of Each Disbursement this Period 250.00
City Totowa State NJ Zip Code 07512	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Marino Polanco		Transaction ID: 30b-21-00839-00839 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vickiana Polanco		Transaction ID: 30b-21-00840-00840 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 227 Monroe Street		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Lilianny Ramos		Transaction ID: 30b-21-00841-00841 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 61 Irving Place		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Deivis Reyes		Transaction ID: 30b-21-00842-00842 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 147 Summer Street		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Rivera		Transaction ID: 30b-21-00843-00843 Date of Disbursement 10 / 20 / 2006	
Mailing Address 53 Park Avenue Apt 2		Amount of Each Disbursement this Period 350.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Carlos Rodriguez		Transaction ID: 30b-21-00844-00844 Date of Disbursement 10 / 20 / 2006	
Mailing Address 100 Passaic Street Apt 4G		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Roberto Rosario		Transaction ID: 30b-21-00846-00846 Date of Disbursement 10 / 20 / 2006	
Mailing Address 177 Eight Street		Amount of Each Disbursement this Period 200.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joel Rufino Full Name (Last, First, Middle Initial) Mailing Address 20 4th Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00847-00847 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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B. Tiffany Rutherford Full Name (Last, First, Middle Initial) Mailing Address 297 Chestnut Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00848-00848 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Cesar Santana Full Name (Last, First, Middle Initial) Mailing Address 272 Hope Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00849-00849 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lina Serna Full Name (Last, First, Middle Initial) Mailing Address 23 Passaic Avenue #D9 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00850-00850 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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B. CARLYS SEVERINO Full Name (Last, First, Middle Initial) Mailing Address 23 Passaic Avenue #D9 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00851-00851 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. Alfonso Siri Full Name (Last, First, Middle Initial) Mailing Address 381 Lafayette Avenue, Apartment 3 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00852-00852 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yudis Siri		Transaction ID: 30b-21-00853-00853 Date of Disbursement 10 / 20 / 2006	
Mailing Address 188 Myrtle Avenue		Amount of Each Disbursement this Period 350.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Mennio Soto		Transaction ID: 30b-21-00854-00854 Date of Disbursement 10 / 20 / 2006	
Mailing Address 20 Henderson Street		Amount of Each Disbursement this Period 300.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Jeffrey Tapia		Transaction ID: 30b-21-00855-00855 Date of Disbursement 10 / 20 / 2006	
Mailing Address 364 Highland Avenue		Amount of Each Disbursement this Period 50.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Domingo Tejada		Transaction ID: 30b-21-00856-00856 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 106 Passaic Street, Apartment 2		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Gira Tejada		Transaction ID: 30b-21-00857-00857 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Joel Toribio		Transaction ID: 30b-21-00858-00858 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 194 8th Street Apartment 1		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Joel Toribio		Transaction ID: 30b-21-00859-00859 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 194 8th Street Apartment 1		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Juliany Toribio		Transaction ID: 30b-21-00860-00860 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 194 8th Street Apartment 1		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Aladino Urban		Transaction ID: 30b-21-00861-00861 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alexander Urban		Transaction ID: 30b-21-00862-00862 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jason Urban		Transaction ID: 30b-21-00863-00863 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 450.00
City Passaic State NJ Zip Code 07055	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Shevonne Smith		Transaction ID: 30b-21-01217-01217 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 328 Myrtle Avenue		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dalandra Epting		Transaction ID: 30b-21-01219-01219 Date of Disbursement 10 / 20 / 2006	
Mailing Address 25 Joyce Kimer Avenue, Apt. 2, P.O.		Amount of Each Disbursement this Period 275.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Argenis Picon		Transaction ID: 30b-21-01220-01220 Date of Disbursement 10 / 20 / 2006	
Mailing Address 270 Summer Avenue 1st Floor		Amount of Each Disbursement this Period 175.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Edwin Ramos		Transaction ID: 30b-21-01221-01221 Date of Disbursement 10 / 20 / 2006	
Mailing Address 532 Broadway Street		Amount of Each Disbursement this Period 185.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	635.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Natalie Agboyibar		Transaction ID: 30b-21-01222-01222 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 64 Tensaw Drive		Amount of Each Disbursement this Period 90.00
City Brownsmills State NJ Zip Code 08015	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Karyn Coles		Transaction ID: 30b-21-01223-01223 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 36 Arrowwood Court		Amount of Each Disbursement this Period 50.00
City Deptford State NJ Zip Code 08096	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Stephanie Chavez		Transaction ID: 30b-21-00331-00331 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 10 North 11th Street		Amount of Each Disbursement this Period 160.00
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Yazmin Clemente Full Name (Last, First, Middle Initial) Mailing Address 127 Charles Street City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00332-00332 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 230.00 Category/Type
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B. Monica Compre Full Name (Last, First, Middle Initial) Mailing Address 9 Fleet Street City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00333-00333 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 290.00 Category/Type
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C. Elizabeth De Jesus Full Name (Last, First, Middle Initial) Mailing Address 73 Hancock Avenue City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00334-00334 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Arsenia De Lumen		Transaction ID: 30b-21-00335-00335 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 241 Virginia Avenue, Apt 2		Amount of Each Disbursement this Period 160.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Crystal Fantauzzi		Transaction ID: 30b-21-00336-00336 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 224 Whiton Street		Amount of Each Disbursement this Period 195.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jennifer Flores		Transaction ID: 30b-21-00337-00337 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 27 East 36th Street		Amount of Each Disbursement this Period 315.00
City Bayonne State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ada Fuentes		Transaction ID: 30b-21-00338-00338
Mailing Address 111 Prospect Street, Apartment 1L		Date of Disbursement 10 / 20 / 2006
City Jersey City	State NJ	Zip Code 07307
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 315.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Antony Hage		Transaction ID: 30b-21-00339-00339
Mailing Address 442 Lawn Ridge		Date of Disbursement 10 / 20 / 2006
City Orange	State NJ	Zip Code 07050
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 160.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Samantha Hernandez		Transaction ID: 30b-21-00340-00340
Mailing Address 319 Fairmount Avenue Apt. 1		Date of Disbursement 10 / 20 / 2006
City Jersey City	State NJ	Zip Code 07307
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 315.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	790.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Francis Jorge		Transaction ID: 30b-21-00342-00342 Date of Disbursement 10 / 20 / 2006
Mailing Address 630 Bergen Avenue		Amount of Each Disbursement this Period 255.00
City Jersey City State NJ Zip Code 07304	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. David Laboy		Transaction ID: 30b-21-00343-00343 Date of Disbursement 10 / 20 / 2006
Mailing Address 100 Montgomery Street Apt 11H		Amount of Each Disbursement this Period 360.00
City Jersey City State NJ Zip Code 07302	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sixto Marmol		Transaction ID: 30b-21-00344-00344 Date of Disbursement 10 / 20 / 2006
Mailing Address 527 38th Street		Amount of Each Disbursement this Period 560.00
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1175.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jose Martinez		Transaction ID: 30b-21-00345-00345 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 205 Monticello Street Apartment 1		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Normand		Transaction ID: 30b-21-00346-00346 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 335.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Vanessa Normand		Transaction ID: 30b-21-00347-00347 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 175.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	710.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Joshua Padilla		Transaction ID: 30b-21-00348-00348 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 17 Beacon Avenue		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
B. Full Name (Last, First, Middle Initial) Joseph Pagan		Transaction ID: 30b-21-00349-00349 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 162 Third Street Apt 86		Amount of Each Disbursement this Period 616.00
City Jersey City State NJ Zip Code 07302		
Purpose of Disbursement Field Consulting Services Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
C. Full Name (Last, First, Middle Initial) Oscar Pena		Transaction ID: 30b-21-00350-00350 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 241 Virginia Avenue, Apt 2		Amount of Each Disbursement this Period 160.00
City Jersey City State NJ Zip Code 07304		
Purpose of Disbursement Field Consulting Services Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1026.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Williams Quashawn		Transaction ID: 30b-21-00351-00351 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 581 Thomas Street		Amount of Each Disbursement this Period 160.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Janet Rambla		Transaction ID: 30b-21-00352-00352 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 396 20th Avenue		Amount of Each Disbursement this Period 160.00
City Paterson State NJ Zip Code 07513	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Johanna Recinos		Transaction ID: 30b-21-00353-00353 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 7 Main Terrace		Amount of Each Disbursement this Period 265.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	585.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Peter Rosario Full Name (Last, First, Middle Initial) Mailing Address 17 Gracie Road City East Hanover State NJ Zip Code 07936 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00354-00354 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 340.00 Category/Type
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B. Ronell Surrell Full Name (Last, First, Middle Initial) Mailing Address 165 Grand Avenue City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00355-00355 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Cinthya Toledo Full Name (Last, First, Middle Initial) Mailing Address 111 Lincoln Street City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00356-00356 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 160.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	740.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Valenzuela		Transaction ID: 30b-21-00358-00358 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 48 Hobart Street		Amount of Each Disbursement this Period 250.00
City Ridgefield Park	State NJ Zip Code 07660	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jason Velante		Transaction ID: 30b-21-00359-00359 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 300 Parsippany Road, Apt 24-O		Amount of Each Disbursement this Period 160.00
City Parsippany	State NJ Zip Code 07054	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Francis Yeager		Transaction ID: 30b-21-00360-00360 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 105 Westover Place, Apt 6		Amount of Each Disbursement this Period 560.00
City West New York	State NJ Zip Code 07093	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	970.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Harry Aceti		Transaction ID: 30b-21-00361-00361 Date of Disbursement 10 / 20 / 2006	
Mailing Address 8 Highway Road		Amount of Each Disbursement this Period 300.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mary Ann Aceti		Transaction ID: 30b-21-00362-00362 Date of Disbursement 10 / 20 / 2006	
Mailing Address 8 Highview Road		Amount of Each Disbursement this Period 300.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Martha Alicea		Transaction ID: 30b-21-00363-00363 Date of Disbursement 10 / 20 / 2006	
Mailing Address 175 New York Avenue		Amount of Each Disbursement this Period 300.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Renee Azer		Transaction ID: 30b-21-00365-00365 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 528 Kennedy Boulevard 2nd Floor		Amount of Each Disbursement this Period 250.00
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Frederick Blors		Transaction ID: 30b-21-00366-00366 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 42 Sycamore Road		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Raymond Burner		Transaction ID: 30b-21-00367-00367 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 43 Clark Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph Conte		Transaction ID: 30b-21-00368-00368 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 204 Bartholdi Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeffrey East		Transaction ID: 30b-21-00369-00369 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 75 Clark Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jeffrey Felusme		Transaction ID: 30b-21-00371-00371 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 70 Wade Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eleanor Ferguson		Transaction ID: 30b-21-00372-00372 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 69 Clarke Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Nathaniel Ferguson		Transaction ID: 30b-21-00373-00373 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 69 Clarke Ave		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. William Garretson		Transaction ID: 30b-21-00375-00375 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 265 Cator Avenue		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Thomas Lambert Full Name (Last, First, Middle Initial) Mailing Address 11 Jefferson Avenue City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00376-00376 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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B. Sean Matthias Full Name (Last, First, Middle Initial) Mailing Address 4 Skillman Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00377-00377 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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C. Daniel McMahon Full Name (Last, First, Middle Initial) Mailing Address 62 Linden Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00378-00378 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anna Marie Meyers		Transaction ID: 30b-21-00379-00379 Date of Disbursement 10 / 20 / 2006	
Mailing Address 38 West 7th Street		Amount of Each Disbursement this Period 300.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Mooney		Transaction ID: 30b-21-00381-00381 Date of Disbursement 10 / 20 / 2006	
Mailing Address 31 West 31st Street		Amount of Each Disbursement this Period 420.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Maria Morales		Transaction ID: 30b-21-00382-00382 Date of Disbursement 10 / 20 / 2006	
Mailing Address 2011 New York Ave		Amount of Each Disbursement this Period 100.00	
City Union City State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	820.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Robert Motcera Full Name (Last, First, Middle Initial) Mailing Address 7 Clark Avenue City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00383-00383 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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B. Jaby Paul Full Name (Last, First, Middle Initial) Mailing Address 33 Swan Street City Palisades State NY Zip Code 10964 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00384-00384 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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C. Margaret Pilla Full Name (Last, First, Middle Initial) Mailing Address 23 Harvard Place City Belleville State NJ Zip Code 07109 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00385-00385 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 170.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yeris Romero		Transaction ID: 30b-21-00387-00387 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 407 3rd Street		Amount of Each Disbursement this Period 100.00
City Union City State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Steven Sanlino		Transaction ID: 30b-21-00388-00388 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 192 Central Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Francisco Serreiro		Transaction ID: 30b-21-00389-00389 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 206 Bergenline Avenue		Amount of Each Disbursement this Period 560.00
City West New York State NJ Zip Code 07093	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	960.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Grace Shokr		Transaction ID: 30b-21-00390-00390 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 104 Fairview Avenue		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07304	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paul Silletti		Transaction ID: 30b-21-00392-00392 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 264 Neptune Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Rayen Sipes		Transaction ID: 30b-21-00393-00393 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 175 West 49th Street		Amount of Each Disbursement this Period 200.00
City Bayonne State NJ Zip Code 07002	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maurice Wayne		Transaction ID: 30b-21-00397-00397 Date of Disbursement 10 / 20 / 2006
Mailing Address 49 Gardner Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Alderick Williams		Transaction ID: 30b-21-00398-00398 Date of Disbursement 10 / 20 / 2006
Mailing Address 281 Claremont Avenue		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Radhouane Zaimi		Transaction ID: 30b-21-00399-00399 Date of Disbursement 10 / 20 / 2006
Mailing Address 517 Avenue A		Amount of Each Disbursement this Period 50.00
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bruce Baker		Transaction ID: 30b-21-00402-00402 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 130 Broad Avenue		Amount of Each Disbursement this Period 25.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. David Braxton		Transaction ID: 30b-21-00404-00404 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 8 Carroll St. Apt 2 Rear		Amount of Each Disbursement this Period 40.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Stacy Bryant		Transaction ID: 30b-21-00405-00405 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 800 Fairmount Avenue		Amount of Each Disbursement this Period 25.00
City State Zip Code Trenton NJ 08629	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sharon Godett		Transaction ID: 30b-21-00409-00409 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address PO Box 322		Amount of Each Disbursement this Period 25.00
City Trenton State NJ Zip Code 08603	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Joanne Hicks		Transaction ID: 30b-21-00410-00410 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 6-1 Fairway Drive		Amount of Each Disbursement this Period 105.00
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mattie Horton		Transaction ID: 30b-21-00412-00412 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 70 North Clinton Avenue Apt 84 A		Amount of Each Disbursement this Period 105.00
City Trenton State NJ Zip Code 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	235.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Craig Howard		Transaction ID: 30b-21-00413-00413 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 27 North Clinton Avenue Apt 109		Amount of Each Disbursement this Period 25.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kevin Hugh		Transaction ID: 30b-21-00414-00414 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 9 Stretton Circle		Amount of Each Disbursement this Period 90.00
City State Zip Code Willingboro NJ 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gabrielle King		Transaction ID: 30b-21-00417-00417 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 910 Bellevue Avenue		Amount of Each Disbursement this Period 25.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	140.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jerry Lewis Full Name (Last, First, Middle Initial) Mailing Address 38 Fowler Drive City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00420-00420 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 25.00 Category/Type
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B. Rena Maske Full Name (Last, First, Middle Initial) Mailing Address 455 Hamilton Avenue, # 5 City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00422-00422 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 105.00 Category/Type
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C. Jamar Pritchard Full Name (Last, First, Middle Initial) Mailing Address 19 Dexter Street City Trenton State NJ Zip Code 08638 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00425-00425 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 25.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	155.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. John Ragsdale		Transaction ID: 30b-21-00428-00428 Date of Disbursement 10 / 20 / 2006
Mailing Address 130 Broad Avenue		Amount of Each Disbursement this Period 25.00
City Ewing State NJ Zip Code 08618	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jan Stokes		Transaction ID: 30b-21-00433-00433 Date of Disbursement 10 / 20 / 2006
Mailing Address 27 North Clinton Avenue, Apt 209		Amount of Each Disbursement this Period 105.00
City Trenton State NJ Zip Code 08609	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Davida Wilson		Transaction ID: 30b-21-00436-00436 Date of Disbursement 10 / 20 / 2006
Mailing Address 200 Fairway Drive		Amount of Each Disbursement this Period 25.00
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	155.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Medina Wilson		Transaction ID: 30b-21-00437-00437 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 2-2 Fairway Drive		Amount of Each Disbursement this Period 40.00
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Destiny Alexander		Transaction ID: 30b-21-00438-00438 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 95.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lynette Barnes		Transaction ID: 30b-21-00442-00442 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 140.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Leandra Bourdot Full Name (Last, First, Middle Initial) Mailing Address 15 Tall Timber Drive City Little Egg Harbor State NJ Zip Code 08087 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00446-00446 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 45.00 Category/Type
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B. Deepa Cherla Full Name (Last, First, Middle Initial) Mailing Address 2000 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00449-00449 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Daphne Clausen Full Name (Last, First, Middle Initial) Mailing Address 264 S Liberty St City Hamilton State NJ Zip Code 08629 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00451-00451 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	155.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christina Crapanzano		Transaction ID: 30b-21-00453-00453 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 75 Tar Lee Place		Amount of Each Disbursement this Period 90.00
City Staten Island State NY Zip Code 10308	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Latrice Cunningham		Transaction ID: 30b-21-00455-00455 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 95.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Erin Duffy		Transaction ID: 30b-21-00459-00459 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 45.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	230.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Eric Freda Full Name (Last, First, Middle Initial) Mailing Address 1584 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00464-00464 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Sarah Gutschow Full Name (Last, First, Middle Initial) Mailing Address 56 Titus Avenue City Lawrenceville State NJ Zip Code 08648 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00467-00467 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Moe Hindi Full Name (Last, First, Middle Initial) Mailing Address 132 West 1st Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00475-00475 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 45.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	385.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Zarif Islam Full Name (Last, First, Middle Initial) Mailing Address Ziegler A303 Rider University. PO City Lawrenceville State NJ Zip Code 08638 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00476-00476 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 95.00 Category/Type
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B. Brendan Kelly Full Name (Last, First, Middle Initial) Mailing Address 123 Fleming Way City Princeton State NJ Zip Code 08540 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00478-00478 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 480.00 Category/Type
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C. Glenn Kraemer Full Name (Last, First, Middle Initial) Mailing Address 23 Whitman Road City Trenton State NJ Zip Code 08619 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00479-00479 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 480.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1055.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Terrence Lang		Transaction ID: 30b-21-00481-00481 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 230.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kirrye' Majors		Transaction ID: 30b-21-00484-00484 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 39 Amherst Drive		Amount of Each Disbursement this Period 50.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Shemea Marshall		Transaction ID: 30b-21-00485-00485 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1300 Asbury Avenue Apt #10		Amount of Each Disbursement this Period 190.00
City Asbury Park State NJ Zip Code 07712	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	470.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Isaac Mireku Full Name (Last, First, Middle Initial) Mailing Address 2000 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00487-00487 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 190.00 Category/Type
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B. Terry Oppong Full Name (Last, First, Middle Initial) Mailing Address 1211 Robert Street Floor 1 City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00495-00495 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 185.00 Category/Type
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C. Leah Posner Full Name (Last, First, Middle Initial) Mailing Address 11 Susan Avenue City Marlboro State NJ Zip Code 07746 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00499-00499 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	465.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rachel Posner		Transaction ID: 30b-21-00500-00500 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 11 Susan Avenue		Amount of Each Disbursement this Period 135.00
City Marlboro State NJ Zip Code 07746	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Scott Reieron		Transaction ID: 30b-21-00502-00502 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1 Ruthies Run		Amount of Each Disbursement this Period 70.00
City West Windsor State NJ Zip Code 08550	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Amanda Sexton		Transaction ID: 30b-21-00503-00503 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 45.00
City Ewing State NJ Zip Code 08628	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jason Smith Full Name (Last, First, Middle Initial) Mailing Address 267 Lynwood Avenue City Hamilton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00506-00506 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 95.00 Category/Type
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B. Nicholas Tyler Full Name (Last, First, Middle Initial) Mailing Address 1215 Forge Road City Cherry Hill State NJ Zip Code 08034 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00508-00508 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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C. Krystal Wilkie Full Name (Last, First, Middle Initial) Mailing Address 7 Hemlock Lane City Bayville State NJ Zip Code 08721 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00510-00510 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 95.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Zimbaldi		Transaction ID: 30b-21-00512-00512 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 110.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeremiah Bonifacio		Transaction ID: 30b-21-00514-00514 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1053 Overlook Terrace		Amount of Each Disbursement this Period 150.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Patrick Chong		Transaction ID: 30b-21-00515-00515 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 91 Sip Avenue, Apt. 703		Amount of Each Disbursement this Period 120.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	380.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel DeJesus		Transaction ID: 30b-21-00516-00516 Date of Disbursement 10 / 20 / 2006
Mailing Address 128 Green Street		Amount of Each Disbursement this Period 320.00
City Somerville State NJ Zip Code 08876	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Woo Song Hwang		Transaction ID: 30b-21-00517-00517 Date of Disbursement 10 / 20 / 2006
Mailing Address 153 Wheaton Place		Amount of Each Disbursement this Period 210.00
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jessica Kwong		Transaction ID: 30b-21-00518-00518 Date of Disbursement 10 / 20 / 2006
Mailing Address 371 Summit Avenue		Amount of Each Disbursement this Period 600.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1130.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Kuleen Mehta		Transaction ID: 30b-21-00522-00522 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 2523 Linn Avenue		Amount of Each Disbursement this Period 130.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Renee Raghoo		Transaction ID: 30b-21-00524-00524 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 435 79th Street		Amount of Each Disbursement this Period 550.00
City North Bergen State NJ Zip Code 07047	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Renato Valenzuela		Transaction ID: 30b-21-00527-00527 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 219 Summit Road		Amount of Each Disbursement this Period 825.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1505.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jose Abreu Full Name (Last, First, Middle Initial) Mailing Address 450 Division, 2nd Floor City Perth Amboy State NJ Zip Code 08861 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00531-00531 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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B. Eduardo Ayala Full Name (Last, First, Middle Initial) Mailing Address 23 Dino Drive City Keasbey State NJ Zip Code 08832 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00532-00532 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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C. Edwin Ayala Full Name (Last, First, Middle Initial) Mailing Address 5 Dino Drive City Keasbey State NJ Zip Code 08832 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00533-00533 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Timmion Banton Full Name (Last, First, Middle Initial) Mailing Address 386 Hale Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00534-00534 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Marbey Barcenas Full Name (Last, First, Middle Initial) Mailing Address 338 East 29th Street City Paterson State NJ Zip Code 07514 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00535-00535 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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C. Jose Batista Full Name (Last, First, Middle Initial) Mailing Address 650 Katherine Avenue City Perth Amboy State NJ Zip Code 08865 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00536-00536 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	810.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Willie Boswell Full Name (Last, First, Middle Initial) Mailing Address 8106 Timberline Court City South Brunswick State NJ Zip Code 08852 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00537-00537 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Reynaldo Caltitla Full Name (Last, First, Middle Initial) Mailing Address 345 Townsend Street 2nd Floor City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00538-00538 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 295.00 Category/Type
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C. Jesus Castillo Full Name (Last, First, Middle Initial) Mailing Address 61 Kendall Drive City Parlin State NJ Zip Code 08859 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00539-00539 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 245.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Austria Cuevas		Transaction ID: 30b-21-00540-00540	
Mailing Address 507 Brace Avenue		Date of Disbursement 10 / 20 / 2006	
City Perth Amboy	State NJ	Zip Code 08861	Amount of Each Disbursement this Period 300.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Melvi Davila		Transaction ID: 30b-21-00541-00541	
Mailing Address 508 Hidden Village Drive		Date of Disbursement 10 / 20 / 2006	
City Perth Amboy	State NJ	Zip Code 08861	Amount of Each Disbursement this Period 547.50
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Maria De Leon		Transaction ID: 30b-21-00542-00542	
Mailing Address 450 Division		Date of Disbursement 10 / 20 / 2006	
City Perth Amboy	State NJ	Zip Code 08861	Amount of Each Disbursement this Period 300.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1147.50
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Yuridia Guzman Full Name (Last, First, Middle Initial) Mailing Address 22 Louis Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00543-00543 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 195.00 Category/Type
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B. Susana Hernandez Full Name (Last, First, Middle Initial) Mailing Address 115 Brighton Avenue Apartment 4 City Perth Amboy State NJ Zip Code 08861 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00544-00544 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Genina Jimenez Full Name (Last, First, Middle Initial) Mailing Address 618 Hanson Avenue City Perth Amboy State NJ Zip Code 08861 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00545-00545 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	595.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jacqueline Lacayo		Transaction ID: 30b-21-00546-00546 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 251 Fulton Street		Amount of Each Disbursement this Period 372.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Andrea Lavalle		Transaction ID: 30b-21-00547-00547 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 115 Brighton Avenue Apt. 4		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Miguel Lavalle		Transaction ID: 30b-21-00548-00548 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 115 Brighton Avenue, Apt. 4		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	472.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gilberta Menes		Transaction ID: 30b-21-00549-00549 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 245.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Reymundo Menes		Transaction ID: 30b-21-00550-00550 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 200.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Jose Moreno		Transaction ID: 30b-21-00551-00551 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 133 Smith Street, Apt. 5		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	495.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rufina Perez		Transaction ID: 30b-21-00552-00552 Date of Disbursement 10 / 20 / 2006	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 195.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kristal Ratliff		Transaction ID: 30b-21-00553-00553 Date of Disbursement 10 / 20 / 2006	
Mailing Address 157 Rutgers Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tammy Ratliff		Transaction ID: 30b-21-00554-00554 Date of Disbursement 10 / 20 / 2006	
Mailing Address P.O. Box 5483		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08903	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	295.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stephanie Rosa		Transaction ID: 30b-21-00555-00555 Date of Disbursement 10 / 20 / 2006	
Mailing Address 95 West Dewey Avenue		Amount of Each Disbursement this Period 350.00	
City Wharton State NJ Zip Code 07885	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Juan C. Solis		Transaction ID: 30b-21-00556-00556 Date of Disbursement 10 / 20 / 2006	
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 100.00	
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dwight Talavera		Transaction ID: 30b-21-00557-00557 Date of Disbursement 10 / 20 / 2006	
Mailing Address 37 Kendall Drive		Amount of Each Disbursement this Period 190.00	
City Parlin State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jose Trinidad		Transaction ID: 30b-21-00559-00559 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 621 20th Avenue		Amount of Each Disbursement this Period 65.00
City Paterson State NJ Zip Code 07504	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Magdalena Vasquez		Transaction ID: 30b-21-00560-00560 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 295.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Johana K. Zegarra		Transaction ID: 30b-21-00561-00561 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 129 Devon Street, Apartment 2		Amount of Each Disbursement this Period 50.00
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	410.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jose Zegarra		Transaction ID: 30b-21-00562-00562 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 129 Devon Street, Apartment 2		Amount of Each Disbursement this Period 200.00
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Tayo Adebisi		Transaction ID: 30b-21-00563-00563 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 57 Stone Street		Amount of Each Disbursement this Period 60.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Oyediron Adelakun		Transaction ID: 30b-21-00564-00564 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 8 Village Gate Road		Amount of Each Disbursement this Period 120.00
City Washington State NJ Zip Code 07882	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	380.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ruslan Aliev Full Name (Last, First, Middle Initial) Mailing Address 338 Horizon Drive City Edison State NJ Zip Code 08817 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00565-00565 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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B. Justin Alsbrook Full Name (Last, First, Middle Initial) Mailing Address 7 Third Avenue City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00566-00566 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 205.00 Category/Type
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C. Dawn Ambrose Full Name (Last, First, Middle Initial) Mailing Address 3111 Birchwood Court City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00567-00567 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	445.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Anis		Transaction ID: 30b-21-00570-00570 Date of Disbursement 10 / 20 / 2006
Mailing Address 45 Lahiere Avenue		Amount of Each Disbursement this Period 456.00
City Edison State NJ Zip Code 08817	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Joshua Baker		Transaction ID: 30b-21-00575-00575 Date of Disbursement 10 / 20 / 2006
Mailing Address 130 Bellmawr Ave.		Amount of Each Disbursement this Period 60.00
City Haddon Heights State NJ Zip Code 08035	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. John Ball		Transaction ID: 30b-21-00578-00578 Date of Disbursement 10 / 20 / 2006
Mailing Address 68 Park Avenue Apt. 405		Amount of Each Disbursement this Period 170.00
City Bloomfield State NJ Zip Code 07003	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	686.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michelle Ball Full Name (Last, First, Middle Initial) Mailing Address 68 Park Avenue Apartment 405 City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00579-00579 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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B. Susan Ball Full Name (Last, First, Middle Initial) Mailing Address 68 Park Avenue Apartment 405 City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00580-00580 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 480.00 Category/Type
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C. Stephen Birmingham Full Name (Last, First, Middle Initial) Mailing Address 8 Milliken Road City Sayerville State NJ Zip Code 08872 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00584-00584 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 493.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1333.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jerome Blum Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00585-00585 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 408-9 Cranbury Road		Amount of Each Disbursement this Period 170.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B. Jack Bohrer Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00586-00586 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 300.00
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C. Antonio Bowser Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-00587-00587 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 5 Clifton Street		Amount of Each Disbursement this Period 105.00
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	575.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. William Brier		Transaction ID: 30b-21-00588-00588 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 18 Norman Street		Amount of Each Disbursement this Period 192.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Daniel Brinamen		Transaction ID: 30b-21-00589-00589 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 235 Clinton Street		Amount of Each Disbursement this Period 60.00
City Woodbridge State NJ Zip Code 07095	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Tim Chen		Transaction ID: 30b-21-00594-00594 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 32250 Rpo Way		Amount of Each Disbursement this Period 60.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	312.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yin Chu		Transaction ID: 30b-21-00595-00595 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 60.00
City Ridgewood	State NJ Zip Code 07450	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jonathan Collado		Transaction ID: 30b-21-00598-00598 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 677 Wood Avenue		Amount of Each Disbursement this Period 170.00
City North Brunswick	State NJ Zip Code 08902	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Marlo Diaz		Transaction ID: 30b-21-00606-00606 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 65 Pennsylvania Way		Amount of Each Disbursement this Period 120.00
City North Brunswick	State NJ Zip Code 08902	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Deyra Diril		Transaction ID: 30b-21-00607-00607 Date of Disbursement 10 / 20 / 2006	
Mailing Address 5 Dana Circle		Amount of Each Disbursement this Period 180.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Justin Dooley		Transaction ID: 30b-21-00608-00608 Date of Disbursement 10 / 20 / 2006	
Mailing Address 3 Greenbriar Lane		Amount of Each Disbursement this Period 120.00	
City Perrineville State NJ Zip Code 08535	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Christopher Egan		Transaction ID: 30b-21-00609-00609 Date of Disbursement 10 / 20 / 2006	
Mailing Address 18 Handy Street		Amount of Each Disbursement this Period 60.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Zachary Egan Full Name (Last, First, Middle Initial) Mailing Address 16 Huntington Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00610-00610 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 265.00 Category/Type
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B. Roland Englis Full Name (Last, First, Middle Initial) Mailing Address 37 Agatha Drive City Edison State NJ Zip Code 08817 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00613-00613 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Robert Estor Full Name (Last, First, Middle Initial) Mailing Address 43 Wellington Road City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00614-00614 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	565.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Gary Feng Full Name (Last, First, Middle Initial) Mailing Address 15 Rutledge Court City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00615-00615 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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B. Allon Finezilber Full Name (Last, First, Middle Initial) Mailing Address 189 B Taylor Avenue City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00616-00616 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 205.00 Category/Type
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C. Aaron Forrest Full Name (Last, First, Middle Initial) Mailing Address 233 Bradford St City Everett State MA Zip Code 02149 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00618-00618 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	685.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Ian Forrester		Transaction ID: 30b-21-00619-00619 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1769 West 5th		Amount of Each Disbursement this Period 145.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Arthur Galarza		Transaction ID: 30b-21-00622-00622 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 460 Andover Place		Amount of Each Disbursement this Period 180.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Anderson Garcia		Transaction ID: 30b-21-00623-00623 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 98 Welton Street		Amount of Each Disbursement this Period 340.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	665.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Conner Gill Full Name (Last, First, Middle Initial) Mailing Address 6 Rydal Place City Montclair State NJ Zip Code 07042 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00625-00625 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 495.00 Category/Type
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B. Davion Gomez Full Name (Last, First, Middle Initial) Mailing Address 107 Vaughan Drive City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00630-00630 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 145.00 Category/Type
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C. Gabe Green-Lemons Full Name (Last, First, Middle Initial) Mailing Address 15701 CPO Way City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00632-00632 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	990.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Oliver Gubenko Full Name (Last, First, Middle Initial) Mailing Address 1 Calvo Place City Hawthorne State NJ Zip Code 07506 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00635-00635 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 170.00 Category/Type
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B. Andres Guevara Full Name (Last, First, Middle Initial) Mailing Address 441 76th Street Apartment B7 City North Bergen State NJ Zip Code 07047 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00636-00636 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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C. Gaesha Hayes Full Name (Last, First, Middle Initial) Mailing Address 312 North 3rd Avenue City Highland Park State NJ Zip Code 08904 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00641-00641 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 606.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	896.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael J. Hayne Full Name (Last, First, Middle Initial) Mailing Address 27 Wildhedge Lane City Holmdel State NJ Zip Code 07733 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00642-00642 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 264.00 Category/Type
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B. Brenda Hoffman Full Name (Last, First, Middle Initial) Mailing Address 70 Mine Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00643-00643 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Thomas Hornemann Full Name (Last, First, Middle Initial) Mailing Address 18 Brotherhood Street City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00645-00645 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 145.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	469.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Darnell Johnson		Transaction ID: 30b-21-00647-00647 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 13 Kloster Boulevard Apt 7C		Amount of Each Disbursement this Period 100.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mirnes Karcic		Transaction ID: 30b-21-00651-00651 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 483 Colonial Avenue		Amount of Each Disbursement this Period 120.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Wayne Kellam		Transaction ID: 30b-21-00653-00653 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 227 Parker Avenue		Amount of Each Disbursement this Period 120.00
City Maplewood State NJ Zip Code 07040	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	340.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andrew Kelly		Transaction ID: 30b-21-00654-00654 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 238 North Clinton Street		Amount of Each Disbursement this Period 340.00
City East Orange State NJ Zip Code 07017	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Alex Kiedaisch		Transaction ID: 30b-21-00655-00655 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 42 Delafield Street Apt. 1		Amount of Each Disbursement this Period 60.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mary Klimik		Transaction ID: 30b-21-00658-00658 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 56 Avenel St.		Amount of Each Disbursement this Period 240.00
City Avenel State NJ Zip Code 07001	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. George Kostis		Transaction ID: 30b-21-00660-00660 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 250 Main Street Apt. 22		Amount of Each Disbursement this Period 120.00
City Spotswood State NJ Zip Code 08884	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-00663-00663 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 747.00
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Richard Lorenzo		Transaction ID: 30b-21-00666-00666 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 33 Hannah Drive		Amount of Each Disbursement this Period 180.00
City Dayton State NJ Zip Code 08810	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1047.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ninotchka Mantrom		Transaction ID: 30b-21-00669-00669 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 14 356 Ridge Road		Amount of Each Disbursement this Period 120.00
City Dayton State NJ Zip Code 08810	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kathryn Mecca		Transaction ID: 30b-21-00670-00670 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 32 Sawyer Court		Amount of Each Disbursement this Period 60.00
City Allendale State NJ Zip Code 07401	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Thomas Mendez		Transaction ID: 30b-21-00671-00671 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1 Springdale Rd.		Amount of Each Disbursement this Period 60.00
City Kendall Park State NJ Zip Code 08824	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Carl Metellus Full Name (Last, First, Middle Initial) Mailing Address 8 Tekening Way City Hamilton State NJ Zip Code 08690 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00673-00673 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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B. Michael Morgan Full Name (Last, First, Middle Initial) Mailing Address 120 Cambridge Avenue City Plainfield State NJ Zip Code 07062 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00675-00675 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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C. Brian Morin Full Name (Last, First, Middle Initial) Mailing Address 10 Meadowlark Lane City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00676-00676 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 145.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	625.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
New Jersey Democratic State Committee

A. Lotanna Onuekwusi Full Name (Last, First, Middle Initial) Mailing Address 369 Park Avenue Apt. E 18 City Orange State NJ Zip Code 07050 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00679-00679 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 400.00 Category/Type
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B. Ebers Ortega Full Name (Last, First, Middle Initial) Mailing Address 400 68th St. City Guttenberg State NJ Zip Code 07093 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00681-00681 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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C. Brenda Parker Full Name (Last, First, Middle Initial) Mailing Address 696B Cranbury Cross Road City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00683-00683 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 432.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	952.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. John Prignano Full Name (Last, First, Middle Initial) Mailing Address 118 Huntington Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00685-00685 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Patrick Pryor Full Name (Last, First, Middle Initial) Mailing Address 5 High Street City Helmetta State NJ Zip Code 08828 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00686-00686 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Scott Reis Full Name (Last, First, Middle Initial) Mailing Address 5 Charlemagne Place City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00691-00691 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 110.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Richard Reyes Full Name (Last, First, Middle Initial) Mailing Address 36 Sandhill Road City Kendall Park State NJ Zip Code 08824 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00693-00693 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 180.00 Category/Type
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B. Chris Rios Full Name (Last, First, Middle Initial) Mailing Address 13 York Avenue City Port Monmouth State NJ Zip Code 07758 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00694-00694 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Matthew Rivera Full Name (Last, First, Middle Initial) Mailing Address 1465 Thomas Avenue City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00695-00695 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christian Rocha		Transaction ID: 30b-21-00697-00697 Date of Disbursement 10 / 20 / 2006	
Mailing Address 36 Quentin Avenue		Amount of Each Disbursement this Period 300.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Ryan Sales		Transaction ID: 30b-21-00699-00699 Date of Disbursement 10 / 20 / 2006	
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 780.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Tanya Santiago		Transaction ID: 30b-21-00700-00700 Date of Disbursement 10 / 20 / 2006	
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 120.00	
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Neelam Sarwar</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1609 Westminster Blvd.</p> <p>City Parlin State NJ Zip Code 08859</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-00701-00701</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.00"/></p>
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<p>B. Nia Shabazz</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1102 Woodhaven Drive</p> <p>City Edison State NJ Zip Code 08817</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-00704-00704</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="408.00"/></p>
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<p>C. Oba Simmonds</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 88 Freemont Court</p> <p>City Somerset State NJ Zip Code 08854</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-00707-00707</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="828.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ilya Slavinski		Transaction ID: 30b-21-00710-00710 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 6 Armstrong Avenue		Amount of Each Disbursement this Period 253.00
City Wayne State NJ Zip Code 07470		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Richard Spellman		Transaction ID: 30b-21-00712-00712 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 118 North Maple Avenue		Amount of Each Disbursement this Period 340.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jorge Tapia		Transaction ID: 30b-21-00716-00716 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 3 Park Place		Amount of Each Disbursement this Period 120.00
City North Brunswick State NJ Zip Code 08902		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	713.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Chris Tomlinson		Transaction ID: 30b-21-00718-00718 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 20 Terrace Court		Amount of Each Disbursement this Period 60.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Tiana Tucker		Transaction ID: 30b-21-00719-00719 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 30 Hana Road		Amount of Each Disbursement this Period 186.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sapaksh Vij		Transaction ID: 30b-21-00724-00724 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 95 East Flagge St.		Amount of Each Disbursement this Period 120.00
City Rockaway State NJ Zip Code 07866	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	366.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mara Villanueva		Transaction ID: 30b-21-00725-00725 Date of Disbursement 10 / 20 / 2006	
Mailing Address 14 Crossgate Road		Amount of Each Disbursement this Period 120.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Li Wang		Transaction ID: 30b-21-00728-00728 Date of Disbursement 10 / 20 / 2006	
Mailing Address 36 Christian Drive		Amount of Each Disbursement this Period 240.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Brett Warnebold		Transaction ID: 30b-21-00730-00730 Date of Disbursement 10 / 20 / 2006	
Mailing Address 148 Baron Lane		Amount of Each Disbursement this Period 720.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1080.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sherry White		Transaction ID: 30b-21-00731-00731 Date of Disbursement 10 / 20 / 2006	
Mailing Address 181 Redmond Street		Amount of Each Disbursement this Period 426.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Alex C. Williams		Transaction ID: 30b-21-00734-00734 Date of Disbursement 10 / 20 / 2006	
Mailing Address 192 Evesham Road		Amount of Each Disbursement this Period 120.00	
City Cherry Hill State NJ Zip Code 08003	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Brian Williams		Transaction ID: 30b-21-00735-00735 Date of Disbursement 10 / 20 / 2006	
Mailing Address 34 Pin Oak Drive		Amount of Each Disbursement this Period 180.00	
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	726.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ebony Williams Full Name (Last, First, Middle Initial) Mailing Address 40 Quentin Avenue City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00736-00736 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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B. Stephanie Williams Full Name (Last, First, Middle Initial) Mailing Address 1435 Oak Tree Drive Apt. K11 City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00738-00738 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Alexander Winters Full Name (Last, First, Middle Initial) Mailing Address 53 Locust Grove City Hazlet State NJ Zip Code 07730 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00739-00739 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel Winters		Transaction ID: 30b-21-00740-00740 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 79 Harmon Road		Amount of Each Disbursement this Period 120.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kenneth Woods		Transaction ID: 30b-21-00741-00741 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 173 Throop Avenue		Amount of Each Disbursement this Period 692.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Clarimel Cepeda		Transaction ID: 30b-21-00748-00748 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 65 Ampere Parkway		Amount of Each Disbursement this Period 294.20
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1106.20
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jamila Ford		Transaction ID: 30b-21-00750-00750 Date of Disbursement 10 / 20 / 2006	
Mailing Address 1 A - B May Street		Amount of Each Disbursement this Period 247.50	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Israel Minaya		Transaction ID: 30b-21-00754-00754 Date of Disbursement 10 / 20 / 2006	
Mailing Address 130 Prospect Avenue		Amount of Each Disbursement this Period 130.00	
City Dunellen State NJ Zip Code 08812	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jose Montesdeoca		Transaction ID: 30b-21-00755-00755 Date of Disbursement 10 / 20 / 2006	
Mailing Address 606 New Street Apt 1		Amount of Each Disbursement this Period 140.00	
City Plainfield State NJ Zip Code 07060	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	517.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Samuel Pegram		Transaction ID: 30b-21-00757-00757 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 4702 Rockwood Drive		Amount of Each Disbursement this Period 125.00
City Houston State TX Zip Code 77004	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kimberly Simonson		Transaction ID: 30b-21-00758-00758 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 20 Hempstead Drive		Amount of Each Disbursement this Period 70.00
City Somerset State NJ Zip Code 08873	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Isaiah Tate		Transaction ID: 30b-21-00759-00759 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 138 Jones Avenue		Amount of Each Disbursement this Period 305.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Patrice Abrams		Transaction ID: 30b-21-00760-00760 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 3-6 Christina Place		Amount of Each Disbursement this Period 80.00
City Paterson State NJ Zip Code 07502	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Shanae Abrams		Transaction ID: 30b-21-00761-00761 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 3-6 Christina Place		Amount of Each Disbursement this Period 120.00
City Paterson State NJ Zip Code 07502	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Quadir Ames		Transaction ID: 30b-21-00762-00762 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 184 Lawrence Place		Amount of Each Disbursement this Period 80.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cecile Aponte		Transaction ID: 30b-21-00763-00763 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 220 Kearney Street		Amount of Each Disbursement this Period 320.00
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Keith Becote		Transaction ID: 30b-21-00764-00764 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 51-4 Colonial Avenue		Amount of Each Disbursement this Period 30.00
City Paterson State NJ Zip Code 07502	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Luz Carrera		Transaction ID: 30b-21-00768-00768 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 88 3rd Avenue		Amount of Each Disbursement this Period 150.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shequita Crocker		Transaction ID: 30b-21-00769-00769 Date of Disbursement 10 / 20 / 2006	
Mailing Address 342 17th Ave.		Amount of Each Disbursement this Period 130.00	
City Paterson State NJ Zip Code 07504	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Alejandro Delavega		Transaction ID: 30b-21-00770-00770 Date of Disbursement 10 / 20 / 2006	
Mailing Address 68 Oak Street.		Amount of Each Disbursement this Period 90.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rafaela Despradel		Transaction ID: 30b-21-00771-00771 Date of Disbursement 10 / 20 / 2006	
Mailing Address 88 3rd Avenue 1st Floor		Amount of Each Disbursement this Period 150.00	
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Antonia Diaz		Transaction ID: 30b-21-00772-00772 Date of Disbursement 10 / 20 / 2006	
Mailing Address 24 Mill Street		Amount of Each Disbursement this Period 280.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Darryl J. Goodwin		Transaction ID: 30b-21-00774-00774 Date of Disbursement 10 / 20 / 2006	
Mailing Address 389 E-39 Street		Amount of Each Disbursement this Period 80.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Altimont Hacker		Transaction ID: 30b-21-00775-00775 Date of Disbursement 10 / 20 / 2006	
Mailing Address 440 East 26th Apartment 2		Amount of Each Disbursement this Period 50.00	
City Paterson State NJ Zip Code 07504	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	410.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Keshawn Harley Full Name (Last, First, Middle Initial) Mailing Address 332 12th Avenue City Paterson State NJ Zip Code 07514 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00776-00776 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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B. Maquet Jefferson Full Name (Last, First, Middle Initial) Mailing Address 35 Mary Street Apartment 1E City Paterson State NJ Zip Code 07503 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00778-00778 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Shamekia McFadden Full Name (Last, First, Middle Initial) Mailing Address 144 Godwin Avenue City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00780-00780 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juan Nunez Full Name (Last, First, Middle Initial) Mailing Address 85 Mill St. City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00782-00782 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Darryl Perkins Full Name (Last, First, Middle Initial) Mailing Address 101 N-4th Street. City Paterson State NJ Zip Code 07522 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00783-00783 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Wanda Phillips Full Name (Last, First, Middle Initial) Mailing Address 41-43 Martin St. City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00784-00784 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

340.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Barry Smith Full Name (Last, First, Middle Initial) Mailing Address 6-2 Christina Place City Paterson State NJ Zip Code 07502 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00785-00785 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Lawrence Smith Full Name (Last, First, Middle Initial) Mailing Address 48 Colonial Avenue City Paterson State NJ Zip Code 07502 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00786-00786 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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C. Michente Stradford Full Name (Last, First, Middle Initial) Mailing Address 670 East 23rd Street City Paterson State NJ Zip Code 07514 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00788-00788 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

280.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Fawn William Full Name (Last, First, Middle Initial) Mailing Address 27 N-4th Street. City Paterson State NJ Zip Code 07522 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00790-00790 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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B. Gwendolyn William Full Name (Last, First, Middle Initial) Mailing Address 27 North 4th Street City Paterson State NJ Zip Code 07522 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00791-00791 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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C. Latoya D Williams Full Name (Last, First, Middle Initial) Mailing Address 184 Lawrence Place City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00792-00792 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

260.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ebony Williams Full Name (Last, First, Middle Initial) Mailing Address 184 Lawrence Street City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00794-00794 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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B. Latoya D Williams Full Name (Last, First, Middle Initial) Mailing Address 184 Lawrence Place City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00795-00795 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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C. James E Williams Full Name (Last, First, Middle Initial) Mailing Address 400 Broadway Apartment 2C City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00796-00796 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Watkina Aquino Full Name (Last, First, Middle Initial) Mailing Address 82 Pennington Avenue Apartment 2L City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00799-00799 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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B. Bianca Arambulo Full Name (Last, First, Middle Initial) Mailing Address 150 Harrison Street #2 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00800-00800 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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C. Chanelle Arambulo Full Name (Last, First, Middle Initial) Mailing Address 150 Harrison Street #2 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00801-00801 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jamie Baez Full Name (Last, First, Middle Initial) Mailing Address 54 Myrtle Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00802-00802 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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B. Emmanuel Cabrera Full Name (Last, First, Middle Initial) Mailing Address 117 8th Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00803-00803 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Jorge Canarte Full Name (Last, First, Middle Initial) Mailing Address 63 Trimble Avenue City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00804-00804 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Edward Capellan Full Name (Last, First, Middle Initial) Mailing Address 7-9 3rd Street #12 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00805-00805 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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B. Jhon Cardona Full Name (Last, First, Middle Initial) Mailing Address 437 Howe Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00806-00806 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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C. Ana Carvajal Full Name (Last, First, Middle Initial) Mailing Address 26 Grace Avenue City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00808-00808 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Cespedes		Transaction ID: 30b-21-00809-00809 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 250 Harrison Street #2B		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Madeline Colon		Transaction ID: 30b-21-00810-00810 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Angel Cruz		Transaction ID: 30b-21-00812-00812 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 15 Sherman Street		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roddy Deleon		Transaction ID: 30b-21-00813-00813 Date of Disbursement 10 / 20 / 2006	
Mailing Address 16363 Bristol Lake Circle		Amount of Each Disbursement this Period 350.00	
City Orlando State FL Zip Code 32828	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Luz Figuero		Transaction ID: 30b-21-00814-00814 Date of Disbursement 10 / 20 / 2006	
Mailing Address 46 Sherman Street 2nd Floor		Amount of Each Disbursement this Period 200.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joel Florencio		Transaction ID: 30b-21-00815-00815 Date of Disbursement 10 / 20 / 2006	
Mailing Address 871 Main Avenue #1		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sully Garcia		Transaction ID: 30b-21-00816-00816 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 381 Harrison Street		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Yurissa Garcia		Transaction ID: 30b-21-00817-00817 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 318 Lafayette Avenue, Apt C14		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ricardo Gomez		Transaction ID: 30b-21-00818-00818 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 3 Lucille Place #12		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Pedro Gonzalez		Transaction ID: 30b-21-00819-00819 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 123 Passaic Street #3		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Richie Gonzalez		Transaction ID: 30b-21-00820-00820 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 106 Lexington Avenue		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michelle Hernandez		Transaction ID: 30b-21-00822-00822 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 12 Martha Place		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alex Valenzuela		Transaction ID: 30b-21-00864-00864 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 109 Kenington Terrace		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Francisco Vallejo		Transaction ID: 30b-21-00865-00865 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 162 Gregory Ave, #9		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Joel Vargas		Transaction ID: 30b-21-00866-00866 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 39 Hammond Avenue #1		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carlos Vasquez		Transaction ID: 30b-21-00868-00868 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 96 Hammond Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Luis Vasquez		Transaction ID: 30b-21-00869-00869 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 7-9 3rd Street #5		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mabel Vasquez		Transaction ID: 30b-21-00870-00870 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 171 Van Buren Street		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nelsy Vasquez		Transaction ID: 30b-21-00871-00871 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 7-9 3rd Street, Apt. 5		Amount of Each Disbursement this Period 350.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Fatema Abuhamdah		Transaction ID: 30b-21-00872-00872 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 142 Caldwell Avenue		Amount of Each Disbursement this Period 370.00	
City Paterson State NJ Zip Code 07510	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dickson Addai		Transaction ID: 30b-21-00874-00874 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 554 Glenwood Avenue		Amount of Each Disbursement this Period 130.00	
City Teaneck State NJ Zip Code 07666	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adem Arifaj		Transaction ID: 30b-21-00875-00875 Date of Disbursement 10 / 20 / 2006	
Mailing Address 20 Wood Street		Amount of Each Disbursement this Period 450.00	
City Garfield	State NJ	Zip Code 07026	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Austin Ayers		Transaction ID: 30b-21-00877-00877 Date of Disbursement 10 / 20 / 2006	
Mailing Address 889 Edwards Road		Amount of Each Disbursement this Period 380.00	
City Parsippany	State NJ	Zip Code 07054	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. John Bishop		Transaction ID: 30b-21-00878-00878 Date of Disbursement 10 / 20 / 2006	
Mailing Address 400 Broadway 4-G		Amount of Each Disbursement this Period 300.00	
City Paterson	State NJ	Zip Code 07501	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1130.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Robert Camalito Full Name (Last, First, Middle Initial) Mailing Address 11 Hickory Road City Pequanock State NJ Zip Code 07440 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00880-00880 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Fernando Carrero Full Name (Last, First, Middle Initial) Mailing Address 801 Mount Prospect Street City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00881-00881 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 190.00 Category/Type
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C. Ysabel Casilla Full Name (Last, First, Middle Initial) Mailing Address 940 McBride Avenue City West Paterson State NJ Zip Code 07424 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00882-00882 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Elena Cesario		Transaction ID: 30b-21-00883-00883 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 443 B Marshall Street		Amount of Each Disbursement this Period 200.00
City Paterson State NJ Zip Code 07503	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Karolina Dobasz		Transaction ID: 30b-21-00886-00886 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 20 East Russel Street Apt. 1		Amount of Each Disbursement this Period 130.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Nyla Fussell		Transaction ID: 30b-21-00887-00887 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 300 Pompton Road		Amount of Each Disbursement this Period 40.00
City Wayne State NJ Zip Code 07470	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jesse Garcia Full Name (Last, First, Middle Initial) Mailing Address 143 East Ninth Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00888-00888 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 270.00 Category/Type
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B. Heidi Gonzalez Full Name (Last, First, Middle Initial) Mailing Address 476 Rutherford Avenue City Lyndhurst State NJ Zip Code 07071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00890-00890 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 160.00 Category/Type
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C. Christina Gordon Full Name (Last, First, Middle Initial) Mailing Address 63 North 1st Street City Paterson State NJ Zip Code 07522 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00891-00891 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	470.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vesna Goreska		Transaction ID: 30b-21-00892-00892 Date of Disbursement 10 / 20 / 2006	
Mailing Address 273 Harding Avenue		Amount of Each Disbursement this Period 360.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nikolce Goreski		Transaction ID: 30b-21-00893-00893 Date of Disbursement 10 / 20 / 2006	
Mailing Address 273 Harding Avenue		Amount of Each Disbursement this Period 360.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Zoran Goreski		Transaction ID: 30b-21-00894-00894 Date of Disbursement 10 / 20 / 2006	
Mailing Address 14 Lincoln Avenue		Amount of Each Disbursement this Period 360.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1080.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Barry Green		Transaction ID: 30b-21-00895-00895 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 730 Elizabeth Avenue		Amount of Each Disbursement this Period 450.00
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Melissa Harris		Transaction ID: 30b-21-00898-00898 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 7 Heller Place		Amount of Each Disbursement this Period 80.00
City Maplewood State NJ Zip Code 07040	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tommy Heredia		Transaction ID: 30b-21-00899-00899 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 77 1/2 Montclair Avenue		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	680.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Janice Latorre Full Name (Last, First, Middle Initial) Mailing Address 24 East Ninth Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00904-00904 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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B. Angel Manzueta Full Name (Last, First, Middle Initial) Mailing Address 67 8th Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00906-00906 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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C. Corey McNeal Full Name (Last, First, Middle Initial) Mailing Address 726 Sixth Avenue City Lyndhurst State NJ Zip Code 07071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00907-00907 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	340.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Dalilah Medina Full Name (Last, First, Middle Initial) Mailing Address 144 Cantello Street City Union City State NJ Zip Code 07087 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00908-00908 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 80.00 Category/Type
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B. Micah Moise Full Name (Last, First, Middle Initial) Mailing Address 599 14th Avenue City Paterson State NJ Zip Code 07504 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00912-00912 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 210.00 Category/Type
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C. Jorge Morel Full Name (Last, First, Middle Initial) Mailing Address 128 East 8th Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00913-00913 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period: 320.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	610.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Christina Mosey Full Name (Last, First, Middle Initial) Mailing Address 179 South Street City Newark State NJ Zip Code 07183 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00914-00914 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
--	--	--

B. Mohammed Mustafa Full Name (Last, First, Middle Initial) Mailing Address 797 Main Street City Paterson State NJ Zip Code 07503 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00916-00916 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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C. Rania Nakla Full Name (Last, First, Middle Initial) Mailing Address 2554-60 Kennedy Boulevard, Apt. 4- City Jersey City State NJ Zip Code 07097 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00917-00917 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 180.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angel Oquendo		Transaction ID: 30b-21-00918-00918 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 177 East Sixth Street		Amount of Each Disbursement this Period 80.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Ortiz Jr		Transaction ID: 30b-21-00919-00919 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 452 Ridge Road		Amount of Each Disbursement this Period 290.00
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Nelson Ortiz Jr.		Transaction ID: 30b-21-00920-00920 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 363 West Clinton Street		Amount of Each Disbursement this Period 300.00
City Haledon State NJ Zip Code 07508	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 254 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Romina Pascual		Transaction ID: 30b-21-00922-00922 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 94 Market Street		Amount of Each Disbursement this Period 200.00
City Paterson State NJ Zip Code 07505	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Emily Polhamus		Transaction ID: 30b-21-00923-00923 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 12 Franklin Road		Amount of Each Disbursement this Period 60.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Trevor Price		Transaction ID: 30b-21-00925-00925 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address Towers, William Paterson Universit		Amount of Each Disbursement this Period 100.00
City Wayne State NJ Zip Code 07470	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 255 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jonathan Rivera		Transaction ID: 30b-21-00930-00930 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 34 Brown Avenue		Amount of Each Disbursement this Period 160.00
City Prospect Park	State NJ	
Zip Code 07508	Purpose of Disbursement Field Consulting Services	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. George Rodriguez		Transaction ID: 30b-21-00932-00932 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 111 Rowland Avenue		Amount of Each Disbursement this Period 270.00
City Clifton	State NJ	
Zip Code 07012	Purpose of Disbursement Field Consulting Services	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Tiara Samuel		Transaction ID: 30b-21-00935-00935 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 3 Bayberry Drive		Amount of Each Disbursement this Period 320.00
City Princeton	State NJ	
Zip Code 08540	Purpose of Disbursement Field Consulting Services	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Bernel Smith Full Name (Last, First, Middle Initial) Mailing Address 485 East 33rd Street City Paterson State NJ Zip Code 07510 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00936-00936 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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B. Kyle Stanton Full Name (Last, First, Middle Initial) Mailing Address 42 West Colfax Avenue City Roselle Park State NJ Zip Code 07204 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00938-00938 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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C. Tommy Stensgard Full Name (Last, First, Middle Initial) Mailing Address 509 3rd Avenue City Lyndhurst State NJ Zip Code 07071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00939-00939 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shaun Tamayo		Transaction ID: 30b-21-00941-00941 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 188 Highland Cross		Amount of Each Disbursement this Period 450.00
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Mark Tilson		Transaction ID: 30b-21-00942-00942 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 64 Prospect Avenue		Amount of Each Disbursement this Period 190.00
City Hackensack State NJ Zip Code 07602	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Helen Trujillo		Transaction ID: 30b-21-00943-00943 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 221 Wayne Avenue		Amount of Each Disbursement this Period 200.00
City Paterson State NJ Zip Code 07502	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	840.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Barbara Walensky		Transaction ID: 30b-21-00945-00945 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 76 DeWitt Street		Amount of Each Disbursement this Period 450.00
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Veronica Yacco		Transaction ID: 30b-21-00947-00947 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 12 Hillside Road		Amount of Each Disbursement this Period 150.00
City Kinneelon State NJ Zip Code 07405	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lorraine Daliessio		Transaction ID: 30b-21-00950-00950 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 843 North Lawrence Street		Amount of Each Disbursement this Period 240.00
City Philadelphia State PA Zip Code 19106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	840.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roberto Segan		Transaction ID: 30b-21-00952-00952 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 526 Wilder Street		Amount of Each Disbursement this Period 312.00
City Philadelphia State PA Zip Code 19147	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rasool Abdullah		Transaction ID: 30b-21-00954-00954 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 110 Oak Street		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bianca Antoine		Transaction ID: 30b-21-00956-00956 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	562.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Cynthia Antoine</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 20 Park Place</p> <p>City Irvington State NJ Zip Code 07111</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-21-00957-00957</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>B. Jessica Antoine</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 20 Park Place</p> <p>City Irvington State NJ Zip Code 07111</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-21-00958-00958</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>C. Joshua Baker</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 27 Beech Street</p> <p>City East Orange State NJ Zip Code 07018</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-21-00963-00963</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="350.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="650.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kieth Barham Full Name (Last, First, Middle Initial) Mailing Address 308 Academy Street City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00967-00967 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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B. Krystal Bradshaw Full Name (Last, First, Middle Initial) Mailing Address 216 Rhode Island Avenue 2nd Floor City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00987-00987 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 600.00 Category/Type
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C. Vernon Bradshaw Full Name (Last, First, Middle Initial) Mailing Address 44 Linwood Place City East Orange State NJ Zip Code 07107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-00988-00988 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1390.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Justin Brown		Transaction ID: 30b-21-00991-00991 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 116 Cleremont Avenue		Amount of Each Disbursement this Period 200.00
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Kevin Brown		Transaction ID: 30b-21-00992-00992 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 281 South Burnett Street		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Victoria Brydie		Transaction ID: 30b-21-00995-00995 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 32 Philip Place		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Butler		Transaction ID: 30b-21-00997-00997 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 353 Leslie Street		Amount of Each Disbursement this Period 100.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kamille Bynum		Transaction ID: 30b-21-00998-00998 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 100.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Majorie Cey		Transaction ID: 30b-21-01000-01000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 108 Paine Avenue		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melinda Cey		Transaction ID: 30b-21-01001-01001 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 109 Paine Avenue		Amount of Each Disbursement this Period 150.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Iman Coachman		Transaction ID: 30b-21-01004-01004 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 17-39 Lincoln Street Apt. 405		Amount of Each Disbursement this Period 350.00	
City East Orange State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Clarice Coleman		Transaction ID: 30b-21-01006-01006 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 448 Main Street		Amount of Each Disbursement this Period 350.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Theresa Combs		Transaction ID: 30b-21-01010-01010 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 164 South Harrison Street		Amount of Each Disbursement this Period 500.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sparkle Conover		Transaction ID: 30b-21-01011-01011 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Leroy Daniels		Transaction ID: 30b-21-01020-01020 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 448 Main Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marietta Davis		Transaction ID: 30b-21-01022-01022 Date of Disbursement 10 / 20 / 2006	
Mailing Address 299 South 9th Street		Amount of Each Disbursement this Period 70.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gilmar Dinas		Transaction ID: 30b-21-01023-01023 Date of Disbursement 10 / 20 / 2006	
Mailing Address 407 37th Street		Amount of Each Disbursement this Period 490.00	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jeffrey Dykes		Transaction ID: 30b-21-01026-01026 Date of Disbursement 10 / 20 / 2006	
Mailing Address 299 South 19th Street		Amount of Each Disbursement this Period 100.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	660.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Francisco Ferreiro Full Name (Last, First, Middle Initial) Mailing Address 126 Paulison Avenue City Ridgefield Park State NJ Zip Code 07660 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01031-01031 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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B. Sara Ferreiro Full Name (Last, First, Middle Initial) Mailing Address 5206 Bergenline Avenue City West New York State NJ Zip Code 07093 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01032-01032 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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C. Sherina Florant Full Name (Last, First, Middle Initial) Mailing Address 306 Isabella Avenue City Irvington State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01033-01033 Date of Disbursement 10 / 20 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1130.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angela Gainer		Transaction ID: 30b-21-01036-01036 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 209 Prospect Street		Amount of Each Disbursement this Period 350.00
City Irvington State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Paige Gainer		Transaction ID: 30b-21-01037-01037 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 209 Prospect Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kathy Gaston		Transaction ID: 30b-21-01039-01039 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 51 Carnegie Avenue 3rd Floor		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andrea Gibbs		Transaction ID: 30b-21-01040-01040 Date of Disbursement 10 / 20 / 2006	
Mailing Address 317 Park Place		Amount of Each Disbursement this Period 150.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Arlene Gibbs		Transaction ID: 30b-21-01041-01041 Date of Disbursement 10 / 20 / 2006	
Mailing Address 311 Park Place		Amount of Each Disbursement this Period 150.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Willard Gibbs		Transaction ID: 30b-21-01042-01042 Date of Disbursement 10 / 20 / 2006	
Mailing Address 317 Park Place		Amount of Each Disbursement this Period 50.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Johnny Goodson		Transaction ID: 30b-21-01046-01046 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 540 Park Avenue Apt 12		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Marvin Goodson		Transaction ID: 30b-21-01047-01047 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 540 Park Avenue Apt. 12		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lash Green		Transaction ID: 30b-21-01051-01051 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1348 Gray Mill Drive		Amount of Each Disbursement this Period 500.00
City Scotch Plains State NJ Zip Code 07076		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Lorenzo Hall		Transaction ID: 30b-21-01055-01055 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 209 Williams Street		Amount of Each Disbursement this Period 180.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Shakina Hickson		Transaction ID: 30b-21-01062-01062 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 23 Western Parkway		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Rodney Holman		Transaction ID: 30b-21-01065-01065 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	680.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Taniquah Holman		Transaction ID: 30b-21-01066-01066 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. John Holmes		Transaction ID: 30b-21-01067-01067 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 265 West End Avenue		Amount of Each Disbursement this Period 200.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lonnie Hughes		Transaction ID: 30b-21-01070-01070 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 450.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rhonda Hughes		Transaction ID: 30b-21-01071-01071 Date of Disbursement 10 / 20 / 2006	
Mailing Address 81 Summit Avenue		Amount of Each Disbursement this Period 150.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Barry Jackson		Transaction ID: 30b-21-01074-01074 Date of Disbursement 10 / 20 / 2006	
Mailing Address 60 Bedford Terrace		Amount of Each Disbursement this Period 200.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nathan Jackson		Transaction ID: 30b-21-01077-01077 Date of Disbursement 10 / 20 / 2006	
Mailing Address 75 So. Munn Avenue		Amount of Each Disbursement this Period 80.00	
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	430.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Malik James		Transaction ID: 30b-21-01080-01080 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 20 Schulyer Avenue 3rd Floor		Amount of Each Disbursement this Period 600.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rufus Johnson		Transaction ID: 30b-21-01083-01083 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 125 Montrose Avenue		Amount of Each Disbursement this Period 420.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sherel Johnson		Transaction ID: 30b-21-01084-01084 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 276 Amherst Street 1st Floor		Amount of Each Disbursement this Period 300.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1320.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jesse Jordan		Transaction ID: 30b-21-01091-01091 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 614 Argyle Avenue		Amount of Each Disbursement this Period 300.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Charles Kidd, Jr.		Transaction ID: 30b-21-01096-01096 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 65 Headley Terrace, Apt # 1-B		Amount of Each Disbursement this Period 350.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nancy Kidd		Transaction ID: 30b-21-01097-01097 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 154 Park Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Kidd, Jr.		Transaction ID: 30b-21-01098-01098 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 65 Headley Terrace, Apt # 1-B		Amount of Each Disbursement this Period 350.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Annette Lampkin		Transaction ID: 30b-21-01102-01102 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 276 Lehigh Avenue		Amount of Each Disbursement this Period 70.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gabriel Leonard		Transaction ID: 30b-21-01103-01103 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 87 Augusta Street		Amount of Each Disbursement this Period 450.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	870.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tina Lucas		Transaction ID: 30b-21-01108-01108 Date of Disbursement 10 / 20 / 2006	
Mailing Address 319 Coit Street		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tylibah Lucas		Transaction ID: 30b-21-01109-01109 Date of Disbursement 10 / 20 / 2006	
Mailing Address 319 Coit Street		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Gloria Lynch		Transaction ID: 30b-21-01110-01110 Date of Disbursement 10 / 20 / 2006	
Mailing Address 245 Pomona Ave		Amount of Each Disbursement this Period 150.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tanisha Manning		Transaction ID: 30b-21-01112-01112 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 139 Mt. Vernon Place		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Crystal March		Transaction ID: 30b-21-01113-01113 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 136 South Munn Avenue 1st Floor		Amount of Each Disbursement this Period 250.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Charles Martin		Transaction ID: 30b-21-01114-01114 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 74		Amount of Each Disbursement this Period 520.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	870.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Beverly McClain		Transaction ID: 30b-21-01118-01118 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 149 Augsta Street		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jacob McGhee		Transaction ID: 30b-21-01120-01120 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 124 Hamilton Street		Amount of Each Disbursement this Period 300.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Keith McKenzie		Transaction ID: 30b-21-01122-01122 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 61 Georgia King Village		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yvena Merritt		Transaction ID: 30b-21-01124-01124 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 249 Glenwood Avenue		Amount of Each Disbursement this Period 300.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Chante Mettaux		Transaction ID: 30b-21-01125-01125 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 593 South 19th Street		Amount of Each Disbursement this Period 500.00
City Newark State NJ Zip Code 07103		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. George Miranda		Transaction ID: 30b-21-01128-01128 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 245 Pamona Avenue		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07112		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lamar Morrison		Transaction ID: 30b-21-01132-01132 Date of Disbursement 10 / 20 / 2006
Mailing Address 29 Western Parkway		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sean Moyer		Transaction ID: 30b-21-01134-01134 Date of Disbursement 10 / 20 / 2006
Mailing Address 452 Walker Street		Amount of Each Disbursement this Period 490.00
City Fairview State NJ Zip Code 07022	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gerald Murphy		Transaction ID: 30b-21-01135-01135 Date of Disbursement 10 / 20 / 2006
Mailing Address 130 Shephard Avenue		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	715.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aaliyah Najieb		Transaction ID: 30b-21-01136-01136 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address PO Box 1103		Amount of Each Disbursement this Period 150.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Motunrayo Okubanjo		Transaction ID: 30b-21-01140-01140 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 81 Sherman Place		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Victor Parker		Transaction ID: 30b-21-01142-01142 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 466 Avon Avenue, 3rd Fl.		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Khazyah Perry		Transaction ID: 30b-21-01144-01144 Date of Disbursement 10 / 20 / 2006
Mailing Address 79 Grace Street		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Cassandra Piercin		Transaction ID: 30b-21-01145-01145 Date of Disbursement 10 / 20 / 2006
Mailing Address 35 Orange Place		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Mike Piscatelli		Transaction ID: 30b-21-01146-01146 Date of Disbursement 10 / 20 / 2006
Mailing Address 108 Grace Street		Amount of Each Disbursement this Period 490.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	790.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cydell Porter		Transaction ID: 30b-21-01147-01147 Date of Disbursement 10 / 20 / 2006	
Mailing Address 29 Melville Place		Amount of Each Disbursement this Period 150.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dante Rollins		Transaction ID: 30b-21-01157-01157 Date of Disbursement 10 / 20 / 2006	
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 100.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lawana Rollins		Transaction ID: 30b-21-01158-01158 Date of Disbursement 10 / 20 / 2006	
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 100.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Rollins		Transaction ID: 30b-21-01159-01159 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Flora Saldaniita		Transaction ID: 30b-21-01161-01161 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 491 Stuyvesant Avenue		Amount of Each Disbursement this Period 100.00
City Irvington State NJ Zip Code 07111		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tamel Saunders		Transaction ID: 30b-21-01164-01164 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 15 Isabelle Avenue 2nd Floor		Amount of Each Disbursement this Period 250.00
City Newark State NJ Zip Code 07016		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Lisa Scott		Transaction ID: 30b-21-01166-01166 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 850.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Bruce Simpson, Jr.		Transaction ID: 30b-21-01171-01171 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 72 Wolcott Terrace		Amount of Each Disbursement this Period 260.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Talya Sinclair		Transaction ID: 30b-21-01172-01172 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 208 Lyons Avenue		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1210.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Calvin Smiley		Transaction ID: 30b-21-01174-01174 Date of Disbursement 10 / 20 / 2006
Mailing Address 282 South 6th Street		Amount of Each Disbursement this Period 200.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Quadira Smith		Transaction ID: 30b-21-01175-01175 Date of Disbursement 10 / 20 / 2006
Mailing Address 57 Marth Street		Amount of Each Disbursement this Period 230.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Reynold Suvil		Transaction ID: 30b-21-01182-01182 Date of Disbursement 10 / 20 / 2006
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	580.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tamara Suvil		Transaction ID: 30b-21-01183-01183 Date of Disbursement 10 / 20 / 2006	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 150.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Denise Taylor		Transaction ID: 30b-21-01186-01186 Date of Disbursement 10 / 20 / 2006	
Mailing Address 818 Stuyvesant Avenue		Amount of Each Disbursement this Period 150.00	
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Edith Thomas		Transaction ID: 30b-21-01187-01187 Date of Disbursement 10 / 20 / 2006	
Mailing Address 264 Amherst Street		Amount of Each Disbursement this Period 150.00	
City East Orange State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Whitney Thomas		Transaction ID: 30b-21-01188-01188 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 328 Myrtle Avenue		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Debbie Walker		Transaction ID: 30b-21-01194-01194 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 226 Rennen Avenue		Amount of Each Disbursement this Period 180.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lois Washington		Transaction ID: 30b-21-01196-01196 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 119 Cooldige Street		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Thomas Whitehurst		Transaction ID: 30b-21-01199-01199 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 389 Hawthorne Avenue		Amount of Each Disbursement this Period 400.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Danielle Williams		Transaction ID: 30b-21-01201-01201 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 389 North Maple Avenue		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Daphne Williams		Transaction ID: 30b-21-01202-01202 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 389 North Maple Avenue		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Danielle Wright		Transaction ID: 30b-21-01211-01211 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 471 North Maple Avenue		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jacqueline Wright		Transaction ID: 30b-21-01212-01212 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 27 Glenwood Place		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Enriquillo Jose		Transaction ID: 30b-21-01224-01224 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 357 Morse Street		Amount of Each Disbursement this Period 228.00
City Camden State NJ Zip Code 08105		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	928.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angelique Thompson		Transaction ID: 30b-21-01225-01225 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 10 Dunhill Court		Amount of Each Disbursement this Period 125.00
City State Zip Code Voorhees NJ 08043	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Victor Cirilo		Transaction ID: 30b-16-08502-0000 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 318.41
City State Zip Code West Orange NJ 07052	Category/ Type	
Purpose of Disbursement See Memo Items		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Victor Cirilo		Transaction ID: 30b-16-08502-08621 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 10.70 [MEMO ITEM]
City State Zip Code West Orange NJ 07052	Category/ Type	
Purpose of Disbursement Office Supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	443.41
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kmart Full Name (Last, First, Middle Initial) Mailing Address 235 Prospect Avenue City West Orange State NJ Zip Code 07052 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08502-08622 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 69.70 [MEMO ITEM]
--	--	---

B. Staples Full Name (Last, First, Middle Initial) Mailing Address Eagle Rock Road City West Orange State NJ Zip Code 07052 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08502-08620 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 238.01 [MEMO ITEM]
--	--	--

C. Brendan Gill Full Name (Last, First, Middle Initial) Mailing Address 6 Rydal Place City Montclair State NJ Zip Code 07042 Purpose of Disbursement See Memo Items Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08503-0000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 152.00
--	--	---

SUBTOTAL of Disbursements This Page (optional) ▶	152.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Douglass Pizza & Grill		Transaction ID: 30b-16-08503-08623 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 821 Somerset Street		Amount of Each Disbursement this Period 152.00 [MEMO ITEM]
City New Brunswick State NJ Zip Code 08873		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hans P Goff		Transaction ID: 30b-16-08504-08624 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 5 Cadawalder Drive		Amount of Each Disbursement this Period 185.00
City Trenton State NJ Zip Code 08618		
Purpose of Disbursement Travel Expenses Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Peter Joseph		Transaction ID: 30b-16-08505-08625 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 110 Gloucester Drive		Amount of Each Disbursement this Period 237.20
City Lawnside State NJ Zip Code 08045		
Purpose of Disbursement Travel Expenses Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	422.20
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Colleen Montgomery		Transaction ID: 30b-16-08506-0000 Date of Disbursement 10 / 22 / 2006
Mailing Address 2 Mazza Drive		Amount of Each Disbursement this Period 192.20
City Northfield	State NJ Zip Code 08225	
Purpose of Disbursement See Memo Items Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: 30b-16-08506-08627 Date of Disbursement 10 / 22 / 2006
Mailing Address 2230 West Marlton		Amount of Each Disbursement this Period 29.35
City Cherry Hill	State NJ Zip Code 08002	
Purpose of Disbursement Office Supplies Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Dunkin Donuts		Transaction ID: 30b-16-08506-08628 Date of Disbursement 10 / 22 / 2006
Mailing Address 335 George Street		Amount of Each Disbursement this Period 73.57
City New Brunswick	State NJ Zip Code 08901	
Purpose of Disbursement Food & Beverage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

192.20

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Colleen Montgomery		Transaction ID: 30b-16-08506-08626 Date of Disbursement 10 / 22 / 2006	
Mailing Address 2 Mazza Drive		Amount of Each Disbursement this Period 89.28	
City Northfield State NJ Zip Code 08225	Purpose of Disbursement Travel Expenses	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Adam Neary		Transaction ID: 30b-16-08507-0000 Date of Disbursement 10 / 22 / 2006	
Mailing Address 108 Commons Drive		Amount of Each Disbursement this Period 454.98	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement See Memo Items	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Adam Neary		Transaction ID: 30b-16-08507-08630 Date of Disbursement 10 / 22 / 2006	
Mailing Address 108 Commons Drive		Amount of Each Disbursement this Period 418.98	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Travel Expenses	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	454.98
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Middlesex County Treasurer - Board of Elections		Transaction ID: 30b-16-08507-08629 Date of Disbursement 10 / 22 / 2006
Mailing Address 1 JFK Square		Amount of Each Disbursement this Period 36.00 [MEMO ITEM]
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Office Supplies Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael D Reed		Transaction ID: 30b-16-08508-0000 Date of Disbursement 10 / 22 / 2006
Mailing Address 109 Spring Street		Amount of Each Disbursement this Period 59.20 [MEMO ITEM]
City Trenton State NJ Zip Code 08618		
Purpose of Disbursement See Memo Items Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. United States Postal Service		Transaction ID: 30b-16-08508-08631 Date of Disbursement 10 / 22 / 2006
Mailing Address Business Mail Entry Unit 307 Industrial Way W		Amount of Each Disbursement this Period 59.20 [MEMO ITEM]
City Eatontown State NJ Zip Code 07799-9651		
Purpose of Disbursement Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	59.20
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Dale Wolfert Full Name (Last, First, Middle Initial) Mailing Address 59 Bosko Drive City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement See Memo Items Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08509-0000 Date of Disbursement 10 / 22 / 2006 Amount of Each Disbursement this Period 163.13 Category/Type
--	--	--

B. Kinkos Full Name (Last, First, Middle Initial) Mailing Address 212 State Highway 18 City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Printing Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08509-08632 Date of Disbursement 10 / 22 / 2006 Amount of Each Disbursement this Period 163.13 Category/Type [MEMO ITEM]
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C. Jeff Meyer Full Name (Last, First, Middle Initial) Mailing Address 15 Spyglass Court City Westhampton State NJ Zip Code 08060 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08511-08634 Date of Disbursement 10 / 22 / 2006 Amount of Each Disbursement this Period 3000.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	3163.13
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jon Cusack		Transaction ID: 30b-16-08512-08635 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 6 Taylor Road		Amount of Each Disbursement this Period 125.00
City Princeton State NJ Zip Code 08540	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Dominick Pandolfo		Transaction ID: 30b-16-08513-08636 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 164 Grand Street, Apt. 1		Amount of Each Disbursement this Period 1250.00
City Jersey City State NJ Zip Code 07302	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Dominick Pandolfo		Transaction ID: 30b-16-08513-08637 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 164 Grand Street, Apt. 1		Amount of Each Disbursement this Period 2500.00
City Jersey City State NJ Zip Code 07302	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3875.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. James Madden		Transaction ID: 30b-16-08514-08638 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 366 Sussex Road		Amount of Each Disbursement this Period 400.00
City Wood-Ridge State NJ Zip Code 07075	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. James Madden		Transaction ID: 30b-16-08514-08639 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 366 Sussex Road		Amount of Each Disbursement this Period 3000.00
City Wood-Ridge State NJ Zip Code 07075	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: 30b-16-08515-08640 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address Verizon Basic Election Services 7821 New Falls Road Floor 2		Amount of Each Disbursement this Period 800.00
City Levittown State PA Zip Code 19055	Purpose of Disbursement Telecommunications Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4200.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: 30b-16-08515-08641 Date of Disbursement
Mailing Address Verizon Basic Election Services 7821 New Falls Road Floor 2		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Levittown	State PA	Zip Code 19055
Purpose of Disbursement Telecommunications Services	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="600.00"/>

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: 30b-16-08515-08642 Date of Disbursement
Mailing Address Verizon Basic Election Services 7821 New Falls Road Floor 2		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Levittown	State PA	Zip Code 19055
Purpose of Disbursement Telecommunications Services	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: 30b-16-08515-08643 Date of Disbursement
Mailing Address Verizon Basic Election Services 7821 New Falls Road Floor 2		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Levittown	State PA	Zip Code 19055
Purpose of Disbursement Telecommunications Services	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="800.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2400.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: 30b-16-08515-08644 Date of Disbursement
Mailing Address Verizon Basic Election Services 7821 New Falls Road Floor 2		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Levittown	State PA	Zip Code 19055
Purpose of Disbursement Telecommunications Services		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: 30b-16-08515-08645 Date of Disbursement
Mailing Address Verizon Basic Election Services 7821 New Falls Road Floor 2		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Levittown	State PA	Zip Code 19055
Purpose of Disbursement Telecommunications Services		Amount of Each Disbursement this Period <input type="text" value="800.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Coach USA - Suburban Transit		Transaction ID: 30b-16-08521-08651 Date of Disbursement
Mailing Address 750 Somerset Street		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City New Brunswick	State NJ	Zip Code 08901
Purpose of Disbursement Travel Services		Amount of Each Disbursement this Period <input type="text" value="5250.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7050.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mantz Advisory Group, LLC		Transaction ID: 30b-16-08522-08652 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 10709 Great Arbor Drive		Amount of Each Disbursement this Period 1500.00
City Potomac State MD Zip Code 20854	Category/ Type	
Purpose of Disbursement Fundraising Consulting Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Wanda Hutchinson		Transaction ID: 30b-16-08525-08655 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 557 Clinton Avenue		Amount of Each Disbursement this Period 1000.00
City Newark State NJ Zip Code 07108	Category/ Type	
Purpose of Disbursement Rent		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Garris & Company		Transaction ID: 30b-16-08526-08656 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 171A South Orange		Amount of Each Disbursement this Period 4500.00
City Newark State NJ Zip Code 07107	Category/ Type	
Purpose of Disbursement Rent		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Quality Office Supplies		Transaction ID: 30b-16-08527-08657 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 474 Ottawa Avenue		Amount of Each Disbursement this Period 5372.22
City Hasbrouck Heights State NJ Zip Code 07604	Category/ Type	
Purpose of Disbursement Office Supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Innovative Soundworx		Transaction ID: 30b-16-08528-08658 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 1429 Willow Avenue		Amount of Each Disbursement this Period 7250.00
City Hoboken State NJ Zip Code 07030	Category/ Type	
Purpose of Disbursement Telecommunications Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: 30b-16-08529-08659 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 4833		Amount of Each Disbursement this Period 869.12
City Trenton State NJ Zip Code 08650	Category/ Type	
Purpose of Disbursement Telecommunications Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	13491.34
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma Restaurant		Transaction ID: 30b-16-08530-08660 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 1500.00
City Paterson State NJ Zip Code 07505	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Proforma WTB Enterprises		Transaction ID: 30b-16-08531-08661 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 1217		Amount of Each Disbursement this Period 7000.00
City Mountainside State NJ Zip Code 07092	Purpose of Disbursement Field Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Wayne Harmon		Transaction ID: 30b-16-08532-08662 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 25 Claremont Avenue		Amount of Each Disbursement this Period 1000.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Rent	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ukranian Community Center of Jersey City, Inc.		Transaction ID: 30b-16-08533-08663 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 90-96 Fleet Street		Amount of Each Disbursement this Period 1000.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Rent	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Irish American Club		Transaction ID: 30b-16-08534-08664 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 95 Kearny Avenue		Amount of Each Disbursement this Period 400.00
City Kearney State NJ Zip Code 07032	Purpose of Disbursement Rent	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Cameo of Woodbridge		Transaction ID: 30b-16-08535-08665 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 800 Rahway Avenue		Amount of Each Disbursement this Period 350.00
City Woodbridge State NJ Zip Code 07095	Purpose of Disbursement Rent	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Presidential Caterers, LLC Full Name (Last, First, Middle Initial) Mailing Address 298 Passaic Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08536-08666 Date of Disbursement 10 / 24 / 2006 Amount of Each Disbursement this Period 3159.00 Category/Type
--	--	--

B. Sandy's Luncheonette Full Name (Last, First, Middle Initial) Mailing Address 322 Rues Lane City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08537-08667 Date of Disbursement 10 / 24 / 2006 Amount of Each Disbursement this Period 480.00 Category/Type
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C. TJ's Catering Full Name (Last, First, Middle Initial) Mailing Address 3107 Bordentown Avenue City Parlin State NJ Zip Code 08559 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08538-08668 Date of Disbursement 10 / 24 / 2006 Amount of Each Disbursement this Period 400.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	4039.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Sunnyside</p> <p>Full Name (Last, First, Middle Initial) Sunnyside</p> <p>Mailing Address 1963 Oak Tree Road</p> <p>City Edison State NJ Zip Code 08820</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-16-08539-08669</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5350.00"/></p>
<p>Purpose of Disbursement</p> <p>Food & Beverage</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Barbero Bakery, Inc.</p> <p>Full Name (Last, First, Middle Initial) Barbero Bakery, Inc.</p> <p>Mailing Address 61 Conrad Street</p> <p>City Trenton State NJ Zip Code 08611</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-16-08540-08670</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2200.00"/></p>
<p>Purpose of Disbursement</p> <p>Food & Beverage</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Laico's</p> <p>Full Name (Last, First, Middle Initial) Laico's</p> <p>Mailing Address 67 Terhune Avenue</p> <p>City Jersey City State NJ Zip Code 07305</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-16-08541-08671</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3250.00"/></p>
<p>Purpose of Disbursement</p> <p>Food & Beverage</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="10800.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. P.J. Ryan's		Transaction ID: 30b-16-08542-08672 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 172 First Street		Amount of Each Disbursement this Period 3500.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Bagelicious		Transaction ID: 30b-16-08543-08673 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 1208 Delsea Drive		Amount of Each Disbursement this Period 960.00
City Westville State NJ Zip Code 08093	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Cooper's Liquors & Deli		Transaction ID: 30b-16-08544-08674 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 594 Orange Street		Amount of Each Disbursement this Period 5000.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	9460.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ponzio's Full Name (Last, First, Middle Initial) Mailing Address Crescent Boulevard & Brow City Gloucester City State NJ Zip Code 08030 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08545-08675 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 2942.50 Category/Type
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B. Piccola Roma Restaurant Full Name (Last, First, Middle Initial) Mailing Address 146 Washington Street City Paterson State NJ Zip Code 07505 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08546-08676 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 9900.00 Category/Type
---	--	--

C. Avis Rent-A-Car Full Name (Last, First, Middle Initial) Mailing Address 332 US Highway 46 West City Little Ferry State NJ Zip Code 07643 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08547-08677 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 7513.20 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	20355.70
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Just Four Wheels, Inc.		Transaction ID: 30b-16-08548-08678 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 324 East White Horse Pike		Amount of Each Disbursement this Period 1947.36
City Galloway State NJ Zip Code 08205	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Enterprise Rent - A - Car - Somerset		Transaction ID: 30b-16-08549-08679 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 495 Somerset Street		Amount of Each Disbursement this Period 5301.41
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Just Four Wheels, Inc.		Transaction ID: 30b-16-08550-08680 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 324 East White Horse Pike		Amount of Each Disbursement this Period 4914.49
City Galloway State NJ Zip Code 08205	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	12163.26
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Harman Transportation		Transaction ID: 30b-16-08551-08681 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 518 Superior Road		Amount of Each Disbursement this Period 3300.00
City Egg Harbor State NJ Zip Code 08234	Purpose of Disbursement Travel Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hudson County Transport, Inc.		Transaction ID: 30b-16-08552-08682 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 114-128 Amity Street Montgomery Industrial Park		Amount of Each Disbursement this Period 3000.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Travel Expenses	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Avis Rent a Car		Transaction ID: 30b-16-08553-08683 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 3729 US Highway 1		Amount of Each Disbursement this Period 1670.30
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Travel Expenses	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7970.30
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rent A Wreck		Transaction ID: 30b-16-08554-08684 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 916 Route 9		Amount of Each Disbursement this Period 1265.40
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. A&A Discount Auto Rental		Transaction ID: 30b-16-08555-08685 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 55 Riverview Avenue		Amount of Each Disbursement this Period 1306.88
City Edison State NJ Zip Code 08817	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. U-Save Auto Rental		Transaction ID: 30b-16-08556-08686 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 910 Broadway		Amount of Each Disbursement this Period 1157.30
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3729.58
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Just Four Wheels		Transaction ID: 30b-16-08557-08687 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address DBA: JFW Franklin Park 3231A Route 27		Amount of Each Disbursement this Period 9505.00
City Franklin Park State NJ Zip Code 08823		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Dollar Rent-A-Car		Transaction ID: 30b-16-08558-08688 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address Ride Share Systems, LLC Route 46 West and Andrews Avenue		Amount of Each Disbursement this Period 1108.72
City West Paterson State NJ Zip Code 07424		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Wizard Auto Rental		Transaction ID: 30b-16-08559-08689 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 2085 Hudson Street		Amount of Each Disbursement this Period 3166.92
City Fort Lee State NJ Zip Code 07024		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

13780.64

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Wizard Auto Rental - Clifton		Transaction ID: 30b-16-08560-08690
Mailing Address 500 Lexington Avenue		Date of Disbursement 10 / 24 / 2006
City Clifton	State NJ	Zip Code 07011
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 4022.85
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-16-08561-08691
Mailing Address Newark Airport, Building #28		Date of Disbursement 10 / 24 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 2380.80
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Almost New Rentals		Transaction ID: 30b-16-08562-08692
Mailing Address GRM Enterprise Inc. 43 Progress Street		Date of Disbursement 10 / 24 / 2006
City Union	State NJ	Zip Code 07083
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 8040.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	14443.65
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: 30b-16-08566-08696 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
Mailing Address Verizon Basic Election Services 7821 New Falls Road Floor 2		Amount of Each Disbursement this Period 2000.00	
City Levittown	State PA		Zip Code 19055
Purpose of Disbursement Telecommunications Services			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Labels & Lists		Transaction ID: 30b-16-08571-08701 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address 2500 116th Avenue NE		Amount of Each Disbursement this Period 49690.80	
City Bellevue	State WA		Zip Code 98004
Purpose of Disbursement Printing Services			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Wireless Management Services, LLC		Transaction ID: 30b-16-08573-08703 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address 42 South Maple Avenue, Suite #1		Amount of Each Disbursement this Period 4500.00	
City Ridgewood	State NJ		Zip Code 07450
Purpose of Disbursement Telecommunications Services			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	56190.80
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Silver Strategies and Communications, Inc.		Transaction ID: 30b-16-08574-08704 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address 0-111 Blue Hill Avenue		Amount of Each Disbursement this Period 16639.44
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Voter Contact Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Congregation B'nai Israel		Transaction ID: 30b-16-08575-08705 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 2573		Amount of Each Disbursement this Period 300.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. SVM, LP		Transaction ID: 30b-16-08578-08708 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address 999 East Touhy Avenue Suite 250		Amount of Each Disbursement this Period 1760.95
City Des Plaines State IL Zip Code 60018	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	18700.39
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08699-08832
Mailing Address 150 West State Street		Date of Disbursement 10 / 26 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 10.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RWDSU Local 108		Transaction ID: 30b-16-08583-08713
Mailing Address 1576 Springfield Avenue		Date of Disbursement 10 / 27 / 2006
City Maplewood	State NJ	Zip Code 07040
Purpose of Disbursement Site Rental		Amount of Each Disbursement this Period 285.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Shoprite of Willingboro		Transaction ID: 30b-16-08580-08710
Mailing Address 400 JFK Boulevard		Date of Disbursement 10 / 27 / 2006
City Willingboro	State NJ	Zip Code 08046
Purpose of Disbursement Food & Beverage		Amount of Each Disbursement this Period 512.12
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	807.12
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Boilermakers Local 28		Transaction ID: 30b-16-08582-08712 Date of Disbursement 10 / 27 / 2006
Mailing Address 976 Broadway		Amount of Each Disbursement this Period 235.00
City Bayonne	State NJ Zip Code 07002	
Purpose of Disbursement Site Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. IBEW Local Union 164		Transaction ID: 30b-16-08584-08714 Date of Disbursement 10 / 27 / 2006
Mailing Address 65 West Century Road		Amount of Each Disbursement this Period 1350.00
City Paramus	State NJ Zip Code 07652	
Purpose of Disbursement Site Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. IUOE Local 68		Transaction ID: 30b-16-08585-08715 Date of Disbursement 10 / 27 / 2006
Mailing Address 11 Fairfield Place		Amount of Each Disbursement this Period 235.00
City West Caldwell	State NJ Zip Code 07006	
Purpose of Disbursement Site Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1820.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Painters Union		Transaction ID: 30b-16-08586-08716 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 9-B Fadem Road		Amount of Each Disbursement this Period 235.00
City Springfield State NJ Zip Code 07081	Purpose of Disbursement Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. IBEW Local 400		Transaction ID: 30b-16-08588-08718 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 3301 Highway 138		Amount of Each Disbursement this Period 310.00
City Wall State NJ Zip Code 07719	Purpose of Disbursement Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 30b-16-08704-08837 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 971.32
City Trenton State NJ Zip Code 08608	Purpose of Disbursement Fraudulent Account Activity Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1516.32
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08706-08839
Mailing Address 150 West State Street		Date of Disbursement 10 / 27 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 5.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Dawn Asberry		Transaction ID: 30b-21-01389-01389
Mailing Address 284 Leslie Street		Date of Disbursement 10 / 27 / 2006
City Newark	State NJ	Zip Code 07112
Purpose of Disbursement Field Consulting Services		Amount of Each Disbursement this Period 80.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Joshua Baker		Transaction ID: 30b-21-01393-01393
Mailing Address 27 Beech Street		Date of Disbursement 10 / 27 / 2006
City East Orange	State NJ	Zip Code 07018
Purpose of Disbursement Field Consulting Services		Amount of Each Disbursement this Period 350.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	435.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kieth Barham Full Name (Last, First, Middle Initial) Mailing Address 308 Academy Street City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01396-01396 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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B. Dalandra Barton Full Name (Last, First, Middle Initial) Mailing Address 275 Prospect Street, Apt#4C City East Orange State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01398-01398 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. Ebony Barton Full Name (Last, First, Middle Initial) Mailing Address 275 Prospect Street Apt 4C City East Orange State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01399-01399 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	890.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Clifford Baxter Full Name (Last, First, Middle Initial) Mailing Address 320 South Orange Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01401-01401 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Elaine Beasley Full Name (Last, First, Middle Initial) Mailing Address 97 Court Street City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01403-01403 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. LaCreashia Boyd Full Name (Last, First, Middle Initial) Mailing Address 308 South 10th Street City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01416-01416 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 220.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	470.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vernon Bradshaw		Transaction ID: 30b-21-01417-01417 Date of Disbursement 10 / 27 / 2006
Mailing Address 44 Linwood Place		Amount of Each Disbursement this Period 450.00
City East Orange State NJ Zip Code 07107		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Krystal Bradshaw		Transaction ID: 30b-21-01418-01418 Date of Disbursement 10 / 27 / 2006
Mailing Address 216 Rhode Island Avenue 2nd Floor		Amount of Each Disbursement this Period 600.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kevin Brown		Transaction ID: 30b-21-01425-01425 Date of Disbursement 10 / 27 / 2006
Mailing Address 281 South Burnett Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sharon Browning		Transaction ID: 30b-21-01426-01426 Date of Disbursement 10 / 27 / 2006
Mailing Address 523 Prospect Street, Apt #9		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Quanika Brydie		Transaction ID: 30b-21-01428-01428 Date of Disbursement 10 / 27 / 2006
Mailing Address 89 Columbia Avenue, Apt. 2B		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07106	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Victoria Brydie		Transaction ID: 30b-21-01429-01429 Date of Disbursement 10 / 27 / 2006
Mailing Address 32 Philip Place		Amount of Each Disbursement this Period 50.00
City Irvington State NJ Zip Code 07111	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kevin Butler Full Name (Last, First, Middle Initial) Mailing Address 353 Leslie Street City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01431-01431 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Kamille Bynum Full Name (Last, First, Middle Initial) Mailing Address 20 Park Place City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01432-01432 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Desirea Carr Full Name (Last, First, Middle Initial) Mailing Address 43 East Park Street Apt 23 City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01434-01434 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Majorie Cey		Transaction ID: 30b-21-01436-01436	
Mailing Address 108 Paine Avenue		Date of Disbursement 10 / 27 / 2006	
City Irvington	State NJ	Zip Code 07111	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Melinda Cey		Transaction ID: 30b-21-01437-01437	
Mailing Address 109 Paine Avenue		Date of Disbursement 10 / 27 / 2006	
City Irvington	State NJ	Zip Code 07111	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Jason Chavis		Transaction ID: 30b-21-01438-01438	
Mailing Address 516 Bergen Street		Date of Disbursement 10 / 27 / 2006	
City Newark	State NJ	Zip Code	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Brsean Cline Full Name (Last, First, Middle Initial) Mailing Address 165 Avon Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01440-01440 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6 Amount of Each Disbursement this Period: 50.00 Category/Type
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B. Iman Coachman Full Name (Last, First, Middle Initial) Mailing Address 17-39 Lincoln Street Apt. 405 City East Orange State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01441-01441 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6 Amount of Each Disbursement this Period: 300.00 Category/Type
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C. Carol Coleman Full Name (Last, First, Middle Initial) Mailing Address 24 Homestead Park City Newark State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01444-01444 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6 Amount of Each Disbursement this Period: 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clarice Coleman		Transaction ID: 30b-21-01446-01446 Date of Disbursement 10 / 27 / 2006
Mailing Address 448 Main Street		Amount of Each Disbursement this Period 350.00
City East Orange	State NJ Zip Code 07018	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Theresa Combs		Transaction ID: 30b-21-01450-01450 Date of Disbursement 10 / 27 / 2006
Mailing Address 164 South Harrison Street		Amount of Each Disbursement this Period 550.00
City East Orange	State NJ Zip Code 07018	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Sparkle Conover		Transaction ID: 30b-21-01451-01451 Date of Disbursement 10 / 27 / 2006
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 250.00
City East Orange	State NJ Zip Code 07017	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vincent Conover		Transaction ID: 30b-21-01452-01452 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 43 East Park Street		Amount of Each Disbursement this Period 250.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Renee Copeland		Transaction ID: 30b-21-01453-01453 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 149 Weequahic Avenue		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07112		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Mike Copeland		Transaction ID: 30b-21-01454-01454 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 210 Richelieu Terrace		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Renee Covington Full Name (Last, First, Middle Initial) Mailing Address 279 Ridgewood Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01456-01456 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
--	--	---

B. Jeran Crawford Full Name (Last, First, Middle Initial) Mailing Address 268 Clinton Place City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01457-01457 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 70.00 Category/Type
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C. Cory Crawford Full Name (Last, First, Middle Initial) Mailing Address 276 Clinton Place City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01458-01458 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	320.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Malukah Cummings		Transaction ID: 30b-21-01460-01460 Date of Disbursement 10 / 27 / 2006
Mailing Address 221 Clinton Avenue		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Leroy Daniels		Transaction ID: 30b-21-01461-01461 Date of Disbursement 10 / 27 / 2006
Mailing Address 448 Main Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Marietta Davis		Transaction ID: 30b-21-01463-01463 Date of Disbursement 10 / 27 / 2006
Mailing Address 299 South 9th Street		Amount of Each Disbursement this Period 110.00
City Newark State NJ Zip Code 07107		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	560.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Gilmar Dinas Full Name (Last, First, Middle Initial) Mailing Address 407 37th Street City Union City State NJ Zip Code 07087 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01464-01464 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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B. John Dupree Full Name (Last, First, Middle Initial) Mailing Address 200 Lincoln Place City Irvington State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01466-01466 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Shakina Hickson Full Name (Last, First, Middle Initial) Mailing Address 23 Western Parkway City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01514-01514 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	740.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joanne Hines Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-01515-01515 Date of Disbursement 10 / 27 / 2006
Mailing Address 150 Stuyvesant Avenue, Apt #1		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Ronald Hines Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-01516-01516 Date of Disbursement 10 / 27 / 2006
Mailing Address 150 Stuyvesant Avenue, Apt #1		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Alex Hippolyte Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-01517-01517 Date of Disbursement 10 / 27 / 2006
Mailing Address 618 Thomas Street		Amount of Each Disbursement this Period 50.00
City Orange State NJ Zip Code		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rodney Holman		Transaction ID: 30b-21-01519-01519 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07107	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Taniquah Holman		Transaction ID: 30b-21-01520-01520 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07107	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. John Holmes		Transaction ID: 30b-21-01521-01521 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 265 West End Avenue		Amount of Each Disbursement this Period 140.00
City Newark State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	840.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rhonda Hughes		Transaction ID: 30b-21-01525-01525 Date of Disbursement 10 / 27 / 2006
Mailing Address 81 Summit Avenue		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07112	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lonnie Hughes		Transaction ID: 30b-21-01526-01526 Date of Disbursement 10 / 27 / 2006
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 450.00
City East Orange State NJ Zip Code 07017	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Faheem Hurt		Transaction ID: 30b-21-01529-01529 Date of Disbursement 10 / 27 / 2006
Mailing Address 55 Tracey Avenue		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tyrone Jackson		Transaction ID: 30b-21-01532-01532 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1 Columbia Place		Amount of Each Disbursement this Period 50.00
City Parlin State NJ Zip Code 08859		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nathan Jackson		Transaction ID: 30b-21-01535-01535 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 75 So. Munn Avenue		Amount of Each Disbursement this Period 70.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Barry Jackson		Transaction ID: 30b-21-01536-01536 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 60 Bedford Terrace		Amount of Each Disbursement this Period 250.00
City Irvington State NJ Zip Code 07111		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Malik James		Transaction ID: 30b-21-01538-01538 Date of Disbursement 10 / 27 / 2006
Mailing Address 20 Schulyer Avenue 3rd Floor		Amount of Each Disbursement this Period 400.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sherel Johnson		Transaction ID: 30b-21-01542-01542 Date of Disbursement 10 / 27 / 2006
Mailing Address 276 Amherst Street 1st Floor		Amount of Each Disbursement this Period 400.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Rufus Johnson		Transaction ID: 30b-21-01543-01543 Date of Disbursement 10 / 27 / 2006
Mailing Address 125 Montrose Avenue		Amount of Each Disbursement this Period 420.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1220.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shvonne Jones		Transaction ID: 30b-21-01545-01545 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 214 Orange Street		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jesse Jordan		Transaction ID: 30b-21-01547-01547 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 614 Argyle Avenue		Amount of Each Disbursement this Period 350.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Corey Joseph		Transaction ID: 30b-21-01548-01548 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1013 Walnut Street		Amount of Each Disbursement this Period 140.00
City Roselle State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	590.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nancy Kidd		Transaction ID: 30b-21-01549-01549 Date of Disbursement 10 / 27 / 2006	
Mailing Address 154 Park Street		Amount of Each Disbursement this Period 350.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Charles Kidd		Transaction ID: 30b-21-01550-01550 Date of Disbursement 10 / 27 / 2006	
Mailing Address 65 Headley Terrace, Apt # 1-B		Amount of Each Disbursement this Period 350.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Charles Kidd, Jr.		Transaction ID: 30b-21-01551-01551 Date of Disbursement 10 / 27 / 2006	
Mailing Address 65 Headley Terrace, Apt # 1-B		Amount of Each Disbursement this Period 350.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Thomas Kiernan		Transaction ID: 30b-21-01552-01552 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 9 Madison Ave, Apartment 6		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Linda King		Transaction ID: 30b-21-01553-01553 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 97 Willowdale Avenue		Amount of Each Disbursement this Period 270.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Annette Lampkin		Transaction ID: 30b-21-01558-01558 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 276 Lehigh Avenue		Amount of Each Disbursement this Period 110.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gabriel Leonard		Transaction ID: 30b-21-01561-01561 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 87 Augusta Street		Amount of Each Disbursement this Period 450.00
City Irvington State NJ Zip Code 07111		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Wilma Leslie		Transaction ID: 30b-21-01562-01562 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 28 Street. Paul Avenue		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07106		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jeffery Logan		Transaction ID: 30b-21-01563-01563 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 265 West End Avenue		Amount of Each Disbursement this Period 250.00
City Newark State NJ Zip Code 07106		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	760.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Janelle Lowery		Transaction ID: 30b-21-01565-01565 Date of Disbursement 10 / 27 / 2006	
Mailing Address 353 Leslie Street		Amount of Each Disbursement this Period 150.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Tylibah Lucas		Transaction ID: 30b-21-01566-01566 Date of Disbursement 10 / 27 / 2006	
Mailing Address 319 Coit Street		Amount of Each Disbursement this Period 50.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Tina Lucas		Transaction ID: 30b-21-01567-01567 Date of Disbursement 10 / 27 / 2006	
Mailing Address 319 Coit Street		Amount of Each Disbursement this Period 150.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gloria Lynch		Transaction ID: 30b-21-01570-01570 Date of Disbursement 10 / 27 / 2006
Mailing Address 245 Pomona Ave		Amount of Each Disbursement this Period 110.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Gloria Lynch		Transaction ID: 30b-21-01571-01571 Date of Disbursement 10 / 27 / 2006
Mailing Address 245 Pomona Ave		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Quadree Manning		Transaction ID: 30b-21-01573-01573 Date of Disbursement 10 / 27 / 2006
Mailing Address 138 Mt. Vernon Place		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tanisha Manning		Transaction ID: 30b-21-01574-01574 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 139 Mt. Vernon Place		Amount of Each Disbursement this Period 260.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Shanaid Manning		Transaction ID: 30b-21-01575-01575 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 138 Mt. Vernon Place		Amount of Each Disbursement this Period 290.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Crystal March		Transaction ID: 30b-21-01576-01576 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 136 South Munn Avenue 1st Floor		Amount of Each Disbursement this Period 300.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Martin		Transaction ID: 30b-21-01578-01578 Date of Disbursement 10 / 27 / 2006
Mailing Address P.O. Box 74		Amount of Each Disbursement this Period 520.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sabrina Maximin		Transaction ID: 30b-21-01579-01579 Date of Disbursement 10 / 27 / 2006
Mailing Address 380 Union Avenue		Amount of Each Disbursement this Period 50.00
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Stephen McAllister		Transaction ID: 30b-21-01581-01581 Date of Disbursement 10 / 27 / 2006
Mailing Address 279 Ridgewood Avenue		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Beverly McClain		Transaction ID: 30b-21-01583-01583 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 149 Augsta Street		Amount of Each Disbursement this Period 50.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jacob McGhee		Transaction ID: 30b-21-01586-01586 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 124 Hamilton Street		Amount of Each Disbursement this Period 300.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Keith McKenzie		Transaction ID: 30b-21-01589-01589 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 61 Georgia King Village		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Yvena Merritt Full Name (Last, First, Middle Initial) Mailing Address 249 Glenwood Avenue City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01591-01591 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
--	--	---

B. Nick Dominguez Full Name (Last, First, Middle Initial) Mailing Address 79 Ann Street City Newark State NJ Zip Code 07105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01797-01797 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Christopher Echeverria Full Name (Last, First, Middle Initial) Mailing Address 11 Webber Road City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01799-01799 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Syieda Ellison		Transaction ID: 30b-21-01802-01802 Date of Disbursement 10 / 27 / 2006	
Mailing Address 573 Morris Street		Amount of Each Disbursement this Period 50.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Esqueree		Transaction ID: 30b-21-01803-01803 Date of Disbursement 10 / 27 / 2006	
Mailing Address 181 Mitchell Street		Amount of Each Disbursement this Period 130.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Larissa Folk		Transaction ID: 30b-21-01805-01805 Date of Disbursement 10 / 27 / 2006	
Mailing Address PO Box 1067		Amount of Each Disbursement this Period 200.00	
City Maplewood State NJ Zip Code 07040	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	380.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Naomi Gonzalez		Transaction ID: 30b-21-01808-01808 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 203 Watchung Avenue		Amount of Each Disbursement this Period 30.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Beatrice Gonzalez		Transaction ID: 30b-21-01809-01809 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 203 Watchung Avenue Apt 2		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Jayson Harpster		Transaction ID: 30b-21-01810-01810 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 400 South Orange Avenue		Amount of Each Disbursement this Period 100.00
City South Orange State NJ Zip Code 07079	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	230.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Donald Kraszewski		Transaction ID: 30b-21-01820-01820 Date of Disbursement 10 / 27 / 2006
Mailing Address 7 Jefferson Street		Amount of Each Disbursement this Period 150.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Tramaine Marwino		Transaction ID: 30b-21-01825-01825 Date of Disbursement 10 / 27 / 2006
Mailing Address 53 Elm Street		Amount of Each Disbursement this Period 50.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Sydell Mejia		Transaction ID: 30b-21-01828-01828 Date of Disbursement 10 / 27 / 2006
Mailing Address 89 Watchung Avenue		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joaner Napoleon Full Name (Last, First, Middle Initial) Mailing Address 35 Watssesing Avenue City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01831-01831 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Jean Napoleon Full Name (Last, First, Middle Initial) Mailing Address 35 Watssesing Avenue City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01832-01832 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. Timothy O'donnell Full Name (Last, First, Middle Initial) Mailing Address 400 South Orange Avenue City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01836-01836 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Monica Green		Transaction ID: 30b-21-02248-02248 Date of Disbursement 10 / 27 / 2006	
Mailing Address 100 Netherwood Avenue		Amount of Each Disbursement this Period 180.00	
City North Plainfield State NJ Zip Code 07062	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gabe Green-Lemons		Transaction ID: 30b-21-02249-02249 Date of Disbursement 10 / 27 / 2006	
Mailing Address 15701 CPO Way		Amount of Each Disbursement this Period 350.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James Griffin		Transaction ID: 30b-21-02250-02250 Date of Disbursement 10 / 27 / 2006	
Mailing Address 15 School Street		Amount of Each Disbursement this Period 540.00	
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1070.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eugene Grignonier		Transaction ID: 30b-21-02251-02251 Date of Disbursement 10 / 27 / 2006
Mailing Address 60 Frost		Amount of Each Disbursement this Period 120.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Andres Guevara		Transaction ID: 30b-21-02252-02252 Date of Disbursement 10 / 27 / 2006
Mailing Address 441 76th Street Apartment B7		Amount of Each Disbursement this Period 180.00
City North Bergen State NJ Zip Code 07047	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Stanley Gumbs		Transaction ID: 30b-21-02254-02254 Date of Disbursement 10 / 27 / 2006
Mailing Address 701 Leland Avenue		Amount of Each Disbursement this Period 265.00
City Plainfield State NJ Zip Code 07063	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	565.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gaesha Hayes		Transaction ID: 30b-21-02256-02256 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 312 North 3rd Avenue		Amount of Each Disbursement this Period 792.00
City Highland Park State NJ Zip Code 08904	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael J. Hayne		Transaction ID: 30b-21-02257-02257 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 228.00
City Holmdel State NJ Zip Code 07733	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Thomas Hornemann		Transaction ID: 30b-21-02258-02258 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 18 Brotherhood Street		Amount of Each Disbursement this Period 120.00
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1140.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jose Jaquez		Transaction ID: 30b-21-02260-02260 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 176 Hale Street		Amount of Each Disbursement this Period 180.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Darnell Johnson		Transaction ID: 30b-21-02264-02264 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 13 Kloster Boulevard Apt 7C		Amount of Each Disbursement this Period 462.00
City Edison State NJ Zip Code 08837	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tania Jones		Transaction ID: 30b-21-02265-02265 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 727 Magnolia Road		Amount of Each Disbursement this Period 372.00
City North Brunswick State NJ Zip Code 08902	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1014.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Jordan		Transaction ID: 30b-21-02266-02266 Date of Disbursement 10 / 27 / 2006
Mailing Address 380 Fulton Street		Amount of Each Disbursement this Period 384.00
City New Brunswick	State NJ	
Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Vishal Kachhadia		Transaction ID: 30b-21-02267-02267 Date of Disbursement 10 / 27 / 2006
Mailing Address 125 George Road		Amount of Each Disbursement this Period 60.00
City Emerson	State NJ	
Zip Code 07630		
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Wayne Kellam		Transaction ID: 30b-21-02271-02271 Date of Disbursement 10 / 27 / 2006
Mailing Address 227 Parker Avenue		Amount of Each Disbursement this Period 60.00
City Maplewood	State NJ	
Zip Code 07040		
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	504.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andrew Kelly		Transaction ID: 30b-21-02272-02272 Date of Disbursement 10 / 27 / 2006	
Mailing Address 238 North Clinton Street		Amount of Each Disbursement this Period 408.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Alex Kiedaisch		Transaction ID: 30b-21-02273-02273 Date of Disbursement 10 / 27 / 2006	
Mailing Address 42 Delafield Street Apt. 1		Amount of Each Disbursement this Period 60.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mary Klimik		Transaction ID: 30b-21-02275-02275 Date of Disbursement 10 / 27 / 2006	
Mailing Address 56 Avenel St.		Amount of Each Disbursement this Period 294.00	
City Avenel State NJ Zip Code 07001	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	762.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. George Kostis		Transaction ID: 30b-21-02278-02278 Date of Disbursement 10 / 27 / 2006
Mailing Address 250 Main Street Apt. 22		Amount of Each Disbursement this Period 360.00
City Spotswood State NJ Zip Code 08884	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Janek Kubik		Transaction ID: 30b-21-02280-02280 Date of Disbursement 10 / 27 / 2006
Mailing Address 32 Brunswick Avenue		Amount of Each Disbursement this Period 60.00
City Lambertville State NJ Zip Code 08530	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. David Lam		Transaction ID: 30b-21-02281-02281 Date of Disbursement 10 / 27 / 2006
Mailing Address 22240 BPO Way		Amount of Each Disbursement this Period 145.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	565.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jasmine Lawrence Lewis Ilekis		Transaction ID: 30b-21-02282-02282 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 993.90
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Mario Arrieta		Transaction ID: 30b-21-01232-01232 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 27 Pink Street		Amount of Each Disbursement this Period 60.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Marciel Bastista		Transaction ID: 30b-21-01234-01234 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 120 Sussex Street Apartment 180		Amount of Each Disbursement this Period 300.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1353.90
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Russell Bravo		Transaction ID: 30b-21-01235-01235 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 655 Palisade Road		Amount of Each Disbursement this Period 250.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Priscilla Caicedo		Transaction ID: 30b-21-01236-01236 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 710 Bergen Avenue		Amount of Each Disbursement this Period 200.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Angye Chima		Transaction ID: 30b-21-01237-01237 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 26 Pulaski Place		Amount of Each Disbursement this Period 300.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rocio Cobbs		Transaction ID: 30b-21-01238-01238 Date of Disbursement 10 / 27 / 2006
Mailing Address 377 W Pleasantview Avenue, Apt 207		Amount of Each Disbursement this Period 336.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael Cochiarella		Transaction ID: 30b-21-01239-01239 Date of Disbursement 10 / 27 / 2006
Mailing Address 892 Hopson Street Apt 2		Amount of Each Disbursement this Period 140.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Triff Col		Transaction ID: 30b-21-01240-01240 Date of Disbursement 10 / 27 / 2006
Mailing Address 1620 Edmund Terrace		Amount of Each Disbursement this Period 200.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	676.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Defelice		Transaction ID: 30b-21-01242-01242 Date of Disbursement 10 / 27 / 2006
Mailing Address 20 Maiden Road		Amount of Each Disbursement this Period 280.00
City Little Ferry State NJ Zip Code 07643		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Enrico Domingo		Transaction ID: 30b-21-01244-01244 Date of Disbursement 10 / 27 / 2006
Mailing Address 2139 Van Buren Place		Amount of Each Disbursement this Period 600.00
City Union State NJ Zip Code 07083		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Eugene Fernandez		Transaction ID: 30b-21-01247-01247 Date of Disbursement 10 / 27 / 2006
Mailing Address 18 Park Avenue		Amount of Each Disbursement this Period 110.00
City Kearny State NJ Zip Code 07032		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	990.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Esperanza Flores		Transaction ID: 30b-21-01249-01249 Date of Disbursement 10 / 27 / 2006	
Mailing Address 26 Pulaski Place		Amount of Each Disbursement this Period 336.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Man Han		Transaction ID: 30b-21-01251-01251 Date of Disbursement 10 / 27 / 2006	
Mailing Address 17 Glen Street		Amount of Each Disbursement this Period 100.00	
City Cliffside park State NJ Zip Code 07010	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vlad Katsva		Transaction ID: 30b-21-01254-01254 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1-41 37th Street		Amount of Each Disbursement this Period 348.00	
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	784.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Teodor Kostadinov Full Name (Last, First, Middle Initial) Mailing Address 28 Christina Street City Little Ferry State NJ Zip Code 07643 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01255-01255 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 280.00 Category/Type
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B. Brian Louvado Full Name (Last, First, Middle Initial) Mailing Address 122 Tappan Street City Kearny State NJ Zip Code 07032 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01256-01256 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 160.00 Category/Type
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C. Kevin Lowry Full Name (Last, First, Middle Initial) Mailing Address 8-64 Henderson Boulevard City Fair Lawn State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01257-01257 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 500.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	940.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Shelly Mack Full Name (Last, First, Middle Initial) Mailing Address 22 Leving Street City South Hackensack State NJ Zip Code 07606 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01258-01258 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 110.00 Category/Type
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B. Daniel Mastrangelo Full Name (Last, First, Middle Initial) Mailing Address 459 Primrose Avenue City Oradell State NJ Zip Code 07649 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01259-01259 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 500.00 Category/Type
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C. Francisco Melendez Full Name (Last, First, Middle Initial) Mailing Address 2101 Briarwood Lane City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01260-01260 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	860.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Duban Moreno Full Name (Last, First, Middle Initial) Mailing Address 469 Jackson Avenue City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01261-01261 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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B. Veronica Otalvaro Full Name (Last, First, Middle Initial) Mailing Address 240 Prospect Avenue City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01263-01263 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 280.00 Category/Type
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C. Renato Pagaduan Full Name (Last, First, Middle Initial) Mailing Address 2431 North 3rd Street City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01264-01264 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	730.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ruth Perez Full Name (Last, First, Middle Initial) Mailing Address 85 South State Street City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01266-01266 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 280.00 Category/Type
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B. Kevin Purn Full Name (Last, First, Middle Initial) Mailing Address 7 Marts Lane City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01268-01268 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 290.00 Category/Type
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C. Jayson Reyes Full Name (Last, First, Middle Initial) Mailing Address 2520 Leslie Street City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01270-01270 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cesar Rojas		Transaction ID: 30b-21-01271-01271 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 574 Olympia Avenue 2nd Floor		Amount of Each Disbursement this Period 80.00
City Cliffsides Park State NJ Zip Code 07010	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Vanessa Rosario		Transaction ID: 30b-21-01272-01272 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4 Marion Street		Amount of Each Disbursement this Period 240.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tatiana Ruiz		Transaction ID: 30b-21-01273-01273 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1 Marion Street Apt 2		Amount of Each Disbursement this Period 190.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	510.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christine Smith		Transaction ID: 30b-21-01275-01275 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 100 River Road Apt 32		Amount of Each Disbursement this Period 100.00
City Bogota State NJ Zip Code 07603	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rossana Stella		Transaction ID: 30b-21-01276-01276 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 242 Donaldson Avenue		Amount of Each Disbursement this Period 250.00
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Aldrin Talaway		Transaction ID: 30b-21-01278-01278 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 794 Colonial Arms Road		Amount of Each Disbursement this Period 150.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eduardo Whitt		Transaction ID: 30b-21-01280-01280 Date of Disbursement 10 / 27 / 2006	
Mailing Address 2523 Standish Avenue		Amount of Each Disbursement this Period 250.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Christine Winter		Transaction ID: 30b-21-01281-01281 Date of Disbursement 10 / 27 / 2006	
Mailing Address 165 Howard Avenue		Amount of Each Disbursement this Period 415.00	
City Rochelle Park State NJ Zip Code 07662	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Britney Wyatt		Transaction ID: 30b-21-01282-01282 Date of Disbursement 10 / 27 / 2006	
Mailing Address 387 Creasant Drive		Amount of Each Disbursement this Period 200.00	
City Franklin Lakes State NJ Zip Code 07417	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	865.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Greg Ackles		Transaction ID: 30b-21-01283-01283 Date of Disbursement 10 / 27 / 2006	
Mailing Address 108 Wall Street		Amount of Each Disbursement this Period 40.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Thelma Allen		Transaction ID: 30b-21-01284-01284 Date of Disbursement 10 / 27 / 2006	
Mailing Address 11 Tillman Place		Amount of Each Disbursement this Period 40.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Raafi Allgood		Transaction ID: 30b-21-01285-01285 Date of Disbursement 10 / 27 / 2006	
Mailing Address 64 Bolton Lane		Amount of Each Disbursement this Period 40.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Nathaniel Anderson Full Name (Last, First, Middle Initial) Mailing Address 39 Country Club City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01286-01286 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 320.00 Category/Type
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B. Maurice Anderson Full Name (Last, First, Middle Initial) Mailing Address 39 Country Club City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01287-01287 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
---	--	--

C. Mikole Burke-Anderson Full Name (Last, First, Middle Initial) Mailing Address 39 Country Club City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01289-01289 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Julian Corry</p>		<p>Transaction ID: 30b-21-01290-01290 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	7		2	0	0	6													
<p>Mailing Address 1010 Jarden Court</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> </p>	40.00																			
40.00																						
<p>City Burlington State NJ Zip Code</p>	<p>Purpose of Disbursement Field Consulting Services</p>																					
<p>Candidate Name</p>	<p>Category/ Type</p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>B. Full Name (Last, First, Middle Initial) Constance Hayes</p>		<p>Transaction ID: 30b-21-01291-01291 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	7		2	0	0	6													
<p>Mailing Address 53 Melville Lane</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>60.00</td> </tr> </table> </p>	60.00																			
60.00																						
<p>City Willingboro State NJ Zip Code 08046</p>	<p>Purpose of Disbursement Field Consulting Services</p>																					
<p>Candidate Name</p>	<p>Category/ Type</p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>C. Full Name (Last, First, Middle Initial) Walter Howard Jr.</p>		<p>Transaction ID: 30b-21-01292-01292 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	7		2	0	0	6													
<p>Mailing Address 6 Indian Lane</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> </p>	40.00																			
40.00																						
<p>City Burlington State NJ Zip Code 08016</p>	<p>Purpose of Disbursement Field Consulting Services</p>																					
<p>Candidate Name</p>	<p>Category/ Type</p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>140.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Walter Howard		Transaction ID: 30b-21-01293-01293 Date of Disbursement 10 / 27 / 2006
Mailing Address 8 Latmore		Amount of Each Disbursement this Period 40.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Shawn Landers		Transaction ID: 30b-21-01294-01294 Date of Disbursement 10 / 27 / 2006
Mailing Address 32 Bonnie Lane		Amount of Each Disbursement this Period 40.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Donovan Linder		Transaction ID: 30b-21-01295-01295 Date of Disbursement 10 / 27 / 2006
Mailing Address 211 Colonial Road		Amount of Each Disbursement this Period 40.00
City Edgewater Park State NJ Zip Code 08010	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ravon McCurry		Transaction ID: 30b-21-01296-01296 Date of Disbursement 10 / 27 / 2006
Mailing Address 110 Stacey Court		Amount of Each Disbursement this Period 40.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lakesha Brown		Transaction ID: 30b-21-01299-01299 Date of Disbursement 10 / 27 / 2006
Mailing Address C-13 Sycamore Court South		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Connie DeLeon		Transaction ID: 30b-21-01304-01304 Date of Disbursement 10 / 27 / 2006
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 50.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	140.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kristen DiVenti		Transaction ID: 30b-21-01305-01305 Date of Disbursement 10 / 27 / 2006
Mailing Address 33 Natur Lane		Amount of Each Disbursement this Period 50.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Elise Finley		Transaction ID: 30b-21-01306-01306 Date of Disbursement 10 / 27 / 2006
Mailing Address 416 West Maple Ave		Amount of Each Disbursement this Period 50.00
City Merchantville State NJ Zip Code 08109	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Dollie Gates		Transaction ID: 30b-21-01308-01308 Date of Disbursement 10 / 27 / 2006
Mailing Address 801 Cooper Landing Road		Amount of Each Disbursement this Period 50.00
City Cherry Hill State NJ Zip Code 08034	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	150.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 378 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kye Hunter		Transaction ID: 30b-21-01309-01309 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 140 Aberdeen Lane		Amount of Each Disbursement this Period 100.00
City Blackwood State NJ Zip Code 08012	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Kimberly Kern		Transaction ID: 30b-21-01311-01311 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 615 Walnut Avenue		Amount of Each Disbursement this Period 50.00
City Laurel Springs State NJ Zip Code 08021	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Kenatra Lee		Transaction ID: 30b-21-01312-01312 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1496 Louis Street		Amount of Each Disbursement this Period 100.00
City Camden State NJ Zip Code 08104	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tamara G. Marsh		Transaction ID: 30b-21-01313-01313 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 3623 Fremont Avenue		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Zinnia Sharpe		Transaction ID: 30b-21-01315-01315 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 535 MacKinet Way		Amount of Each Disbursement this Period 100.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Daniel Wright		Transaction ID: 30b-21-01317-01317 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 862 Longwood Circle		Amount of Each Disbursement this Period 50.00	
City Haddonfield State NJ Zip Code 08033	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 380 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Beaudelaire Alerte		Transaction ID: 30b-21-01318-01318 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 136 South 13 Street		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07107		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Alanna Browne		Transaction ID: 30b-21-01320-01320 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 118 South Chester Avenue		Amount of Each Disbursement this Period 150.00
City Pleasantville State NJ Zip Code 08232		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nworu Chinasa		Transaction ID: 30b-21-01321-01321 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 290 Mullica Hill Road		Amount of Each Disbursement this Period 150.00
City Glassboro State NJ Zip Code 08028		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marlen Diaz		Transaction ID: 30b-21-01324-01324 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 5530 Wayne Avenue		Amount of Each Disbursement this Period 250.00
City State Zip Code Pennsauken NJ 08110	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marie Dunlap-Price		Transaction ID: 30b-21-01325-01325 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1272 Magnolia Avenue		Amount of Each Disbursement this Period 100.00
City State Zip Code Camden NJ 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kamile Kuntz		Transaction ID: 30b-21-01327-01327 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 408 Chambers Avenue		Amount of Each Disbursement this Period 150.00
City State Zip Code Camden NJ 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Isreal Laguer Full Name (Last, First, Middle Initial) Mailing Address 635 Vine Street City Camden State NJ Zip Code 08102 Purpose of Disbursement: Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01328-01328 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Ashleen Lopez Full Name (Last, First, Middle Initial) Mailing Address 1244 Browning Street City Camden State NJ Zip Code 08104 Purpose of Disbursement: Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01329-01329 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Matthew Walker Full Name (Last, First, Middle Initial) Mailing Address 102 Holly Street City Glassboro State NJ Zip Code 08028 Purpose of Disbursement: Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01330-01330 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Janeen Williams Full Name (Last, First, Middle Initial) Mailing Address 1066 Lake Shore Drive City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01331-01331 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Elsie Albone Full Name (Last, First, Middle Initial) Mailing Address 880 Kearsley Road City Sicklerville State NJ Zip Code 08081 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01332-01332 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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C. Patricia Bowen Full Name (Last, First, Middle Initial) Mailing Address 13 Brandywine Road City Laurel Springs State NJ Zip Code 08021 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01335-01335 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	390.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lakesha Brown		Transaction ID: 30b-21-01336-01336 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address C-13 Sycamore Court South		Amount of Each Disbursement this Period 200.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Nneka Carter		Transaction ID: 30b-21-01341-01341 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 154 Raritan Street		Amount of Each Disbursement this Period 150.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Cristina DeLeon		Transaction ID: 30b-21-01344-01344 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 250.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Connie DeLeon		Transaction ID: 30b-21-01345-01345 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 250.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kristen DiVenti		Transaction ID: 30b-21-01346-01346 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 33 Natur Lane		Amount of Each Disbursement this Period 200.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Judith Dutton		Transaction ID: 30b-21-01347-01347 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 150.00
City Franklinville State NJ Zip Code 08322	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michaline Ensign		Transaction ID: 30b-21-01348-01348 Date of Disbursement 10 / 27 / 2006	
Mailing Address 18 Hemlock Drive		Amount of Each Disbursement this Period 50.00	
City Blenheim State NJ Zip Code 08012	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Marc Ferrier		Transaction ID: 30b-21-01349-01349 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1849 Cardinal Lake Drive		Amount of Each Disbursement this Period 210.00	
City Cherry Hill State NJ Zip Code 08003	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Marc Garcia		Transaction ID: 30b-21-01351-01351 Date of Disbursement 10 / 27 / 2006	
Mailing Address 311 North Elmwood Road		Amount of Each Disbursement this Period 200.00	
City Marlton State NJ Zip Code 08053	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	460.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dollie Gates		Transaction ID: 30b-21-01352-01352 Date of Disbursement 10 / 27 / 2006	
Mailing Address 801 Cooper Landing Road		Amount of Each Disbursement this Period 200.00	
City Cherry Hill	State NJ	Zip Code 08034	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Kye Hunter		Transaction ID: 30b-21-01353-01353 Date of Disbursement 10 / 27 / 2006	
Mailing Address 140 Aberdeen Lane		Amount of Each Disbursement this Period 100.00	
City Blackwood	State NJ	Zip Code 08012	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. David Keller		Transaction ID: 30b-21-01354-01354 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1 Hoot Owl Drive		Amount of Each Disbursement this Period 100.00	
City Sicklerville	State NJ	Zip Code 08081	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kimberly Kern		Transaction ID: 30b-21-01355-01355 Date of Disbursement 10 / 27 / 2006
Mailing Address 615 Walnut Avenue		Amount of Each Disbursement this Period 50.00
City Laurel Springs State NJ Zip Code 08021	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Timothy Kravitz		Transaction ID: 30b-21-01356-01356 Date of Disbursement 10 / 27 / 2006
Mailing Address 500 Columbia Avenue		Amount of Each Disbursement this Period 100.00
City Pitman State NJ Zip Code 08071	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gustave Lambert		Transaction ID: 30b-21-01357-01357 Date of Disbursement 10 / 27 / 2006
Mailing Address PO Box 143		Amount of Each Disbursement this Period 50.00
City Mauricetown State NJ Zip Code 08239	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kenatra Lee		Transaction ID: 30b-21-01358-01358 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1496 Louis Street		Amount of Each Disbursement this Period 200.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Tamara G. Marsh		Transaction ID: 30b-21-01360-01360 Date of Disbursement 10 / 27 / 2006	
Mailing Address 3623 Fremont Avenue		Amount of Each Disbursement this Period 150.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Shoshana Milovsky		Transaction ID: 30b-21-01362-01362 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1741 Frank Waldo Road		Amount of Each Disbursement this Period 50.00	
City Waterford State NJ Zip Code 08089	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juan Morillo Full Name (Last, First, Middle Initial) Mailing Address 5328 King Avenue City Pennsauken State NJ Zip Code 08109 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01364-01364 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Monique Parker Full Name (Last, First, Middle Initial) Mailing Address 411 East Gibbsboro Road, Apartment City Lindenwold State NJ Zip Code 08021 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01365-01365 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. Tim Pearson Full Name (Last, First, Middle Initial) Mailing Address 1 Lexington Way City Erial State NJ Zip Code 08081 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01366-01366 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jaideep Sen Full Name (Last, First, Middle Initial) Mailing Address 63 Bunning Drive City Voorhees State NJ Zip Code 08043 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01367-01367 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Zinnia Sharpe Full Name (Last, First, Middle Initial) Mailing Address 535 MacKinet Way City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01368-01368 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Daniel Wright Full Name (Last, First, Middle Initial) Mailing Address 862 Longwood Circle City Haddonfield State NJ Zip Code 08033 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01372-01372 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Zinader		Transaction ID: 30b-21-01374-01374 Date of Disbursement 10 / 27 / 2006
Mailing Address 404 Fernwood Avenue		Amount of Each Disbursement this Period 110.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rasool Abdullah		Transaction ID: 30b-21-01376-01376 Date of Disbursement 10 / 27 / 2006
Mailing Address 110 Oak Street		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Hassan Abdul-Rasheed		Transaction ID: 30b-21-01377-01377 Date of Disbursement 10 / 27 / 2006
Mailing Address 259 Reynolds Terrace		Amount of Each Disbursement this Period 100.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bianca Antoine		Transaction ID: 30b-21-01383-01383 Date of Disbursement 10 / 27 / 2006
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 50.00
City Irvington	State NJ Zip Code 07111	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jessica Antoine		Transaction ID: 30b-21-01384-01384 Date of Disbursement 10 / 27 / 2006
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 50.00
City Irvington	State NJ Zip Code 07111	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Cynthia Antoine		Transaction ID: 30b-21-01385-01385 Date of Disbursement 10 / 27 / 2006
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 50.00
City Irvington	State NJ Zip Code 07111	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Craig Euston Full Name (Last, First, Middle Initial) Mailing Address 68 Eppirit Street City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01470-01470 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 270.00 Category/Type
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B. Sara Ferreiro Full Name (Last, First, Middle Initial) Mailing Address 5206 Bergenline Avenue City West New York State NJ Zip Code 07093 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01472-01472 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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C. Francisco Ferreiro Full Name (Last, First, Middle Initial) Mailing Address 126 Paulison Avenue City Ridgefield Park State NJ Zip Code 07660 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01473-01473 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sherina Florant		Transaction ID: 30b-21-01474-01474 Date of Disbursement 10 / 27 / 2006	
Mailing Address 306 Isabella Avenue		Amount of Each Disbursement this Period 150.00	
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Angela Gainer		Transaction ID: 30b-21-01477-01477 Date of Disbursement 10 / 27 / 2006	
Mailing Address 209 Prospect Street		Amount of Each Disbursement this Period 350.00	
City Irvington State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Paige Gainer		Transaction ID: 30b-21-01478-01478 Date of Disbursement 10 / 27 / 2006	
Mailing Address 209 Prospect Street		Amount of Each Disbursement this Period 350.00	
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jahad Garsuett		Transaction ID: 30b-21-01479-01479 Date of Disbursement 10 / 27 / 2006
Mailing Address 144 Pomona Avenue		Amount of Each Disbursement this Period 200.00
City Newark State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kathy Gaston		Transaction ID: 30b-21-01480-01480 Date of Disbursement 10 / 27 / 2006
Mailing Address 51 Carnegie Avenue 3rd Floor		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07108	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Willard Gibbs		Transaction ID: 30b-21-01481-01481 Date of Disbursement 10 / 27 / 2006
Mailing Address 317 Park Place		Amount of Each Disbursement this Period 50.00
City Irvington State NJ Zip Code 07111	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andrea Gibbs		Transaction ID: 30b-21-01483-01483 Date of Disbursement 10 / 27 / 2006	
Mailing Address 317 Park Place		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Arlene Gibbs		Transaction ID: 30b-21-01484-01484 Date of Disbursement 10 / 27 / 2006	
Mailing Address 311 Park Place		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Wanda Goode		Transaction ID: 30b-21-01486-01486 Date of Disbursement 10 / 27 / 2006	
Mailing Address 659 Chancellor Avenue		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Marvin Goodson Full Name (Last, First, Middle Initial) Mailing Address 540 Park Avenue Apt. 12 City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01488-01488 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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B. Johnny Goodson Full Name (Last, First, Middle Initial) Mailing Address 540 Park Avenue Apt 12 City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01489-01489 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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C. Brenda Graves Full Name (Last, First, Middle Initial) Mailing Address 164 Steuben Street City East Orange State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01492-01492 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kenneth Graves		Transaction ID: 30b-21-01493-01493 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 164 Steuben Street		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07108		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Lash Green		Transaction ID: 30b-21-01497-01497 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1348 Gray Mill Drive		Amount of Each Disbursement this Period 500.00
City Scotch Plains State NJ Zip Code 07076		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lorenzo Hall		Transaction ID: 30b-21-01503-01503 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 209 Williams Street		Amount of Each Disbursement this Period 170.00
City Orange State NJ Zip Code 07050		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Shavon Harris</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 84-86 Sunset Avenue</p> <p>City Newark State NJ Zip Code</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-01509-01509</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="170.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Chante Mettaux</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 593 South 19th Street</p> <p>City Newark State NJ Zip Code 07103</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-01592-01592</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Quan Miller</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 259 Reynolds Terrace, Apt#B7</p> <p>City Orange State NJ Zip Code 07050</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-01594-01594</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="770.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Danny Moore Jr		Transaction ID: 30b-21-01600-01600 Date of Disbursement 10 / 27 / 2006
Mailing Address 2-12 Hillside Avenue 104		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lamar Morrison		Transaction ID: 30b-21-01602-01602 Date of Disbursement 10 / 27 / 2006
Mailing Address 29 Western Parkway		Amount of Each Disbursement this Period 50.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sean Moyer		Transaction ID: 30b-21-01603-01603 Date of Disbursement 10 / 27 / 2006
Mailing Address 452 Walker Street		Amount of Each Disbursement this Period 490.00
City Fairview State NJ Zip Code 07022	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gerald Murphy		Transaction ID: 30b-21-01604-01604 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 130 Shephard Avenue		Amount of Each Disbursement this Period 250.00
City East Orange State NJ Zip Code 07018	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Aaliyah Najieb		Transaction ID: 30b-21-01605-01605 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address PO Box 1103		Amount of Each Disbursement this Period 100.00
City Montclair State NJ Zip Code 07042	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nicole Neal		Transaction ID: 30b-21-01607-01607 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 12 Marsac Place		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nikkia Neal		Transaction ID: 30b-21-01608-01608 Date of Disbursement 10 / 27 / 2006
Mailing Address 12 Marsac Place		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Motunrayo Okubanjo		Transaction ID: 30b-21-01614-01614 Date of Disbursement 10 / 27 / 2006
Mailing Address 81 Sherman Place		Amount of Each Disbursement this Period 50.00
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Victor Parker		Transaction ID: 30b-21-01617-01617 Date of Disbursement 10 / 27 / 2006
Mailing Address 466 Avon Avenue, 3rd Fl.		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Khazyah Perry Full Name (Last, First, Middle Initial) Mailing Address 79 Grace Street City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01620-01620 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
--	--	--

B. Cassandra Piercin Full Name (Last, First, Middle Initial) Mailing Address 35 Orange Place City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01621-01621 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Mike Piscatelli Full Name (Last, First, Middle Initial) Mailing Address 108 Grace Street City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01622-01622 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cydell Porter		Transaction ID: 30b-21-01623-01623 Date of Disbursement 10 / 27 / 2006	
Mailing Address 29 Melville Place		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sameerah Powell		Transaction ID: 30b-21-01626-01626 Date of Disbursement 10 / 27 / 2006	
Mailing Address 139 Muhammad Ali Avenue		Amount of Each Disbursement this Period 250.00	
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Irvin Robinson		Transaction ID: 30b-21-01632-01632 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1 Grumman Avenue Apt 2A		Amount of Each Disbursement this Period 100.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Karina Robredo		Transaction ID: 30b-21-01633-01633 Date of Disbursement 10 / 27 / 2006
Mailing Address 20 Cleveland Avenue		Amount of Each Disbursement this Period 270.00
City Harrison State NJ Zip Code 07029	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Dante Rollins		Transaction ID: 30b-21-01634-01634 Date of Disbursement 10 / 27 / 2006
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 250.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lawana Rollins		Transaction ID: 30b-21-01635-01635 Date of Disbursement 10 / 27 / 2006
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 270.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	790.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Rollins		Transaction ID: 30b-21-01636-01636 Date of Disbursement 10 / 27 / 2006	
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 375.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Flora Saldaniita		Transaction ID: 30b-21-01639-01639 Date of Disbursement 10 / 27 / 2006	
Mailing Address 491 Stuyvesant Avenue		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Denise Sales		Transaction ID: 30b-21-01640-01640 Date of Disbursement 10 / 27 / 2006	
Mailing Address 164 Steuben Street		Amount of Each Disbursement this Period 100.00	
City East Orange State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	575.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tamel Saunders		Transaction ID: 30b-21-01642-01642 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 15 Isabelle Avenue 2nd Floor		Amount of Each Disbursement this Period 350.00
City Newark State NJ Zip Code 07016	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Theresa Scott		Transaction ID: 30b-21-01644-01644 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 138 Mt. Veron Place		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07106	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Diane Scott		Transaction ID: 30b-21-01645-01645 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 35 12th Avenue Apt #3503		Amount of Each Disbursement this Period 220.00
City Newark State NJ Zip Code 07103	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lisa Scott		Transaction ID: 30b-21-01646-01646 Date of Disbursement 10 / 27 / 2006	
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 800.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rahmaan Shahid		Transaction ID: 30b-21-01647-01647 Date of Disbursement 10 / 27 / 2006	
Mailing Address 20 Marshall Street		Amount of Each Disbursement this Period 50.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Caryn Shuler		Transaction ID: 30b-21-01648-01648 Date of Disbursement 10 / 27 / 2006	
Mailing Address 395 13th Ave Apt 5		Amount of Each Disbursement this Period 50.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Talya Sinclair		Transaction ID: 30b-21-01652-01652 Date of Disbursement 10 / 27 / 2006	
Mailing Address 208 Lyons Avenue		Amount of Each Disbursement this Period 100.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Christopher Slater		Transaction ID: 30b-21-01653-01653 Date of Disbursement 10 / 27 / 2006	
Mailing Address 268 Prospect Street Apt 2F		Amount of Each Disbursement this Period 100.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ibrahim Small		Transaction ID: 30b-21-01654-01654 Date of Disbursement 10 / 27 / 2006	
Mailing Address 88 Fairmount Terrace		Amount of Each Disbursement this Period 100.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Calvin Smiley Full Name (Last, First, Middle Initial) Mailing Address 282 South 6th Street City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01655-01655 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Shevonne Smith Full Name (Last, First, Middle Initial) Mailing Address 328 Myrtle Avenue City Irvington State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01660-01660 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Quadira Smith Full Name (Last, First, Middle Initial) Mailing Address 57 Marth Street City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01661-01661 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tamara Suvil		Transaction ID: 30b-21-01668-01668 Date of Disbursement 10 / 27 / 2006	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Reynold Suvil		Transaction ID: 30b-21-01669-01669 Date of Disbursement 10 / 27 / 2006	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Edith Thomas		Transaction ID: 30b-21-01677-01677 Date of Disbursement 10 / 27 / 2006	
Mailing Address 264 Amherst Street		Amount of Each Disbursement this Period 50.00	
City East Orange State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Whitney Thomas		Transaction ID: 30b-21-01678-01678 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 328 Myrtle Avenue		Amount of Each Disbursement this Period 50.00
City Irvington State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sulton Vazquez		Transaction ID: 30b-21-01685-01685 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 10 Oak Place		Amount of Each Disbursement this Period 100.00
City Irvington State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nicole Vazquez-Wise		Transaction ID: 30b-21-01686-01686 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 10 Oak Place		Amount of Each Disbursement this Period 90.00
City Irvington State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Debbie Walker		Transaction ID: 30b-21-01687-01687 Date of Disbursement 10 / 27 / 2006	
Mailing Address 226 Rennen Avenue		Amount of Each Disbursement this Period 170.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lois Washington		Transaction ID: 30b-21-01688-01688 Date of Disbursement 10 / 27 / 2006	
Mailing Address 119 Cooldige Street		Amount of Each Disbursement this Period 100.00	
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Annette Watkins		Transaction ID: 30b-21-01689-01689 Date of Disbursement 10 / 27 / 2006	
Mailing Address 90 Schuyler Avenue, 2nd Floor		Amount of Each Disbursement this Period 200.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	470.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Thomas Whitehurst		Transaction ID: 30b-21-01692-01692 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 389 Hawthorne Avenue		Amount of Each Disbursement this Period 300.00
City Newark State NJ Zip Code 07112	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rosie Wilder		Transaction ID: 30b-21-01694-01694 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 469 Elizabeth Avenue		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. John Williams		Transaction ID: 30b-21-01699-01699 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 11 Lincoln Park Apt 31		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07102	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	460.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Richard Williams Full Name (Last, First, Middle Initial) Mailing Address 162 Muhammad Ali Avenue City Newark State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01700-01700 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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B. Robin Williams Full Name (Last, First, Middle Initial) Mailing Address 185 James Street Apt. 3A City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01701-01701 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Danielle Williams Full Name (Last, First, Middle Initial) Mailing Address 389 North Maple Avenue City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01703-01703 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daphne Williams		Transaction ID: 30b-21-01704-01704 Date of Disbursement 10 / 27 / 2006
Mailing Address 389 North Maple Avenue		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Stanley Willis		Transaction ID: 30b-21-01706-01706 Date of Disbursement 10 / 27 / 2006
Mailing Address 495 Bergen Street		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Olivette Willis		Transaction ID: 30b-21-01707-01707 Date of Disbursement 10 / 27 / 2006
Mailing Address 495 Bergen Street		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Irving Woodson		Transaction ID: 30b-21-01708-01708 Date of Disbursement 10 / 27 / 2006
Mailing Address 60 Bedford Terrace		Amount of Each Disbursement this Period 150.00
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jesse Wright		Transaction ID: 30b-21-01709-01709 Date of Disbursement 10 / 27 / 2006
Mailing Address 624 Nye Avenue		Amount of Each Disbursement this Period 100.00
City Irvington State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Danielle Wright		Transaction ID: 30b-21-01710-01710 Date of Disbursement 10 / 27 / 2006
Mailing Address 471 North Maple Avenue		Amount of Each Disbursement this Period 250.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jacqueline Wright Full Name (Last, First, Middle Initial) Mailing Address 27 Glenwood Place City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01711-01711 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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B. Martha Abraham Full Name (Last, First, Middle Initial) Mailing Address 295 Woodside Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01713-01713 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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C. Yasmin Acevedo Full Name (Last, First, Middle Initial) Mailing Address 780 Broadway, Apartment BD City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01714-01714 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anibal Alcantara		Transaction ID: 30b-21-01715-01715 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 15 Heller Parkway		Amount of Each Disbursement this Period 110.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Pedro Aquino		Transaction ID: 30b-21-01716-01716 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 277 Little Street		Amount of Each Disbursement this Period 180.00
City Belleville State NJ Zip Code 07109	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Khalif Ball		Transaction ID: 30b-21-01717-01717 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 148 Tuxedo Parkway		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07106	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	440.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Javier Caicedo		Transaction ID: 30b-21-01719-01719 Date of Disbursement 10 / 27 / 2006
Mailing Address 127 Sylvan Avenue		Amount of Each Disbursement this Period 120.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rebecca Colon		Transaction ID: 30b-21-01723-01723 Date of Disbursement 10 / 27 / 2006
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 205.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Angel Colon		Transaction ID: 30b-21-01724-01724 Date of Disbursement 10 / 27 / 2006
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 245.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	570.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rafael Concepcion, Jr.		Transaction ID: 30b-21-01725-01725 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 200.00
City Newark State NJ Zip Code 07104		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Darlene Cooper		Transaction ID: 30b-21-01726-01726 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 11 Carey Court		Amount of Each Disbursement this Period 170.00
City Montclair State NJ Zip Code 07042		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dioseni Del Jesus		Transaction ID: 30b-21-01727-01727 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 272 Park Avenue		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07104		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Milton Duran Full Name (Last, First, Middle Initial) Mailing Address 676 Highland Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01729-01729 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 525.00 Category/Type
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B. Anthony Fullenwider Full Name (Last, First, Middle Initial) Mailing Address 53 Hockman Place City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01730-01730 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 220.00 Category/Type
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C. Wanda Garcia Full Name (Last, First, Middle Initial) Mailing Address 432 N. 7th Street City Newark State NJ Zip Code 07107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01732-01732 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	865.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Farhan Kamal		Transaction ID: 30b-21-01735-01735 Date of Disbursement 10 / 27 / 2006
Mailing Address 196 Harrison Avenue		Amount of Each Disbursement this Period 220.00
City Harrison State NJ Zip Code 07029	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Fiordaliza Lopez		Transaction ID: 30b-21-01738-01738 Date of Disbursement 10 / 27 / 2006
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Stephen Maisonave		Transaction ID: 30b-21-01739-01739 Date of Disbursement 10 / 27 / 2006
Mailing Address 107 N. 10th Street		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07107	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tiffany Maldonado		Transaction ID: 30b-21-01740-01740 Date of Disbursement 10 / 27 / 2006
Mailing Address 57 Chester Avenue		Amount of Each Disbursement this Period 110.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jonathan Mattos		Transaction ID: 30b-21-01741-01741 Date of Disbursement 10 / 27 / 2006
Mailing Address 15-17 Halleck Street		Amount of Each Disbursement this Period 200.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Javier Morales		Transaction ID: 30b-21-01742-01742 Date of Disbursement 10 / 27 / 2006
Mailing Address 40 West Kinney Street		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07102	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carmen Ocasio		Transaction ID: 30b-21-01743-01743 Date of Disbursement 10 / 27 / 2006	
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 205.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jose Ortiz		Transaction ID: 30b-21-01744-01744 Date of Disbursement 10 / 27 / 2006	
Mailing Address 127 N. 15th Street		Amount of Each Disbursement this Period 100.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Patino		Transaction ID: 30b-21-01745-01745 Date of Disbursement 10 / 27 / 2006	
Mailing Address 641 North 9th Street		Amount of Each Disbursement this Period 525.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	830.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melissa Polanco		Transaction ID: 30b-21-01746-01746 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 243 Broad Street		Amount of Each Disbursement this Period 250.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Paola Posso		Transaction ID: 30b-21-01747-01747 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 7 Davenport Avenue		Amount of Each Disbursement this Period 110.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Oscar Rodriguez		Transaction ID: 30b-21-01753-01753 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 307 Highland Avenue		Amount of Each Disbursement this Period 225.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	585.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marco Rodriguez		Transaction ID: 30b-21-01754-01754 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 307 Highland Avenue		Amount of Each Disbursement this Period 270.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ashley Romero		Transaction ID: 30b-21-01755-01755 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 73 Bellair Place		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sorinette Rosario		Transaction ID: 30b-21-01756-01756 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 255.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	675.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Antonio Santana		Transaction ID: 30b-21-01758-01758 Date of Disbursement 10 / 27 / 2006
Mailing Address 300 Woodside Avenue		Amount of Each Disbursement this Period 350.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Elsa Soto		Transaction ID: 30b-21-01760-01760 Date of Disbursement 10 / 27 / 2006
Mailing Address 356 Union Avenue		Amount of Each Disbursement this Period 205.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lisset Vasquez		Transaction ID: 30b-21-01761-01761 Date of Disbursement 10 / 27 / 2006
Mailing Address 283 Lake Street		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	705.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alaji Ali		Transaction ID: 30b-21-01766-01766 Date of Disbursement 10 / 27 / 2006
Mailing Address 142 Main Street Apt. 1		Amount of Each Disbursement this Period 200.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Scotty Ansong		Transaction ID: 30b-21-01768-01768 Date of Disbursement 10 / 27 / 2006
Mailing Address 131 Washington Street		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Louis Antenor		Transaction ID: 30b-21-01770-01770 Date of Disbursement 10 / 27 / 2006
Mailing Address 46 Lorelei Road		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Arena		Transaction ID: 30b-21-01771-01771 Date of Disbursement 10 / 27 / 2006
Mailing Address 18 Park Drive South 1st Floor		Amount of Each Disbursement this Period 150.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Adam Axelrod		Transaction ID: 30b-21-01772-01772 Date of Disbursement 10 / 27 / 2006
Mailing Address 14 Seaman Road		Amount of Each Disbursement this Period 150.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Claudeen Benoit		Transaction ID: 30b-21-01775-01775 Date of Disbursement 10 / 27 / 2006
Mailing Address 10 North Kowain Place		Amount of Each Disbursement this Period 50.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Abdus Bey		Transaction ID: 30b-21-01776-01776 Date of Disbursement 10 / 27 / 2006
Mailing Address 144 South Valley Road		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ron Botelho		Transaction ID: 30b-21-01779-01779 Date of Disbursement 10 / 27 / 2006
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 182.00
City West Orange State NJ Zip Code 07052	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Malachi Cameron		Transaction ID: 30b-21-01784-01784 Date of Disbursement 10 / 27 / 2006
Mailing Address 9 Freeman Street Apt. 3R		Amount of Each Disbursement this Period 150.00
City West Orange State NJ Zip Code 07052	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	432.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. George Carrero		Transaction ID: 30b-21-01787-01787 Date of Disbursement 10 / 27 / 2006
Mailing Address 26 Ella Street		Amount of Each Disbursement this Period 100.00
City Bloomfield	State NJ Zip Code 07003	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jerry Chapusette		Transaction ID: 30b-21-01789-01789 Date of Disbursement 10 / 27 / 2006
Mailing Address 36 Warsessing Avenue		Amount of Each Disbursement this Period 50.00
City Bloomfield	State NJ Zip Code 07003	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Eva Cirilo		Transaction ID: 30b-21-01790-01790 Date of Disbursement 10 / 27 / 2006
Mailing Address 5809 Hudson Avenue		Amount of Each Disbursement this Period 100.00
City West New York	State NJ Zip Code 07093	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Henry De Koninck		Transaction ID: 30b-21-01794-01794 Date of Disbursement 10 / 27 / 2006
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 625.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gardy Denis		Transaction ID: 30b-21-01795-01795 Date of Disbursement 10 / 27 / 2006
Mailing Address 59 Whittlesey Avenue		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Robert DePaul		Transaction ID: 30b-21-01796-01796 Date of Disbursement 10 / 27 / 2006
Mailing Address 3 Brook End Drive		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	825.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rick Pierre-Philipp		Transaction ID: 30b-21-01839-01839 Date of Disbursement 10 / 27 / 2006
Mailing Address 152 South Valley Road		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Theo Pollack		Transaction ID: 30b-21-01840-01840 Date of Disbursement 10 / 27 / 2006
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 500.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Adrianna Rockford		Transaction ID: 30b-21-01845-01845 Date of Disbursement 10 / 27 / 2006
Mailing Address 112 Ray Street		Amount of Each Disbursement this Period 30.00
City Garfield State NJ Zip Code 07026		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	630.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicole Rodriguez		Transaction ID: 30b-21-01846-01846 Date of Disbursement 10 / 27 / 2006
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 279.50
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Benjamin Schorr		Transaction ID: 30b-21-01849-01849 Date of Disbursement 10 / 27 / 2006
Mailing Address 143 Claremont Avenue		Amount of Each Disbursement this Period 50.00
City Montclair State NJ Zip Code 07042		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Glen Sellers		Transaction ID: 30b-21-01850-01850 Date of Disbursement 10 / 27 / 2006
Mailing Address 42 Elm Street		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	429.50
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Asia Stanislaus		Transaction ID: 30b-21-01859-01859 Date of Disbursement 10 / 27 / 2006
Mailing Address 58 Terrace Avenue		Amount of Each Disbursement this Period 50.00
City West Orange	State NJ	
Zip Code 07052		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Alex Stein		Transaction ID: 30b-21-01860-01860 Date of Disbursement 10 / 27 / 2006
Mailing Address 40 Godfrey Road		Amount of Each Disbursement this Period 50.00
City Montclair	State NJ	
Zip Code 07043		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Ryan Tice		Transaction ID: 30b-21-01863-01863 Date of Disbursement 10 / 27 / 2006
Mailing Address 151 Prospect Avenue, Apartment 6F		Amount of Each Disbursement this Period 500.00
City Hackensack	State NJ	
Zip Code 07601		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sarah Wesley		Transaction ID: 30b-21-01864-01864 Date of Disbursement 10 / 27 / 2006	
Mailing Address 9 Valley Way		Amount of Each Disbursement this Period 75.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anthony Wiltshire		Transaction ID: 30b-21-01865-01865 Date of Disbursement 10 / 27 / 2006	
Mailing Address 128 Hillyer Street		Amount of Each Disbursement this Period 100.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Stephen Wisner		Transaction ID: 30b-21-01866-01866 Date of Disbursement 10 / 27 / 2006	
Mailing Address 25 North Terrace		Amount of Each Disbursement this Period 100.00	
City Maplewood State NJ Zip Code 07040	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Natalie Agboyibar		Transaction ID: 30b-21-01868-01868 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 64 Tensaw Drive		Amount of Each Disbursement this Period 50.00
City State Zip Code Brownsmills NJ 08015	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Karen Badie		Transaction ID: 30b-21-01872-01872 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 520 Collings Avenue Apartment 403B		Amount of Each Disbursement this Period 250.00
City State Zip Code Collingswood NJ 08017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Joshua Bateman		Transaction ID: 30b-21-01873-01873 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 412 Broadway Avenue		Amount of Each Disbursement this Period 250.00
City State Zip Code Westville NJ 08093	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cherell Briggs		Transaction ID: 30b-21-01874-01874 Date of Disbursement 10 / 27 / 2006	
Mailing Address 101 S Walter Avenue		Amount of Each Disbursement this Period 50.00	
City Trenton State NJ Zip Code 08609	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Canary		Transaction ID: 30b-21-01876-01876 Date of Disbursement 10 / 27 / 2006	
Mailing Address 28 Walnut Street		Amount of Each Disbursement this Period 150.00	
City Beachwood State NJ Zip Code 08722	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kerri Daley		Transaction ID: 30b-21-01877-01877 Date of Disbursement 10 / 27 / 2006	
Mailing Address 20 Beloit Avenue		Amount of Each Disbursement this Period 200.00	
City Audubon State NJ Zip Code 08106	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 441 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Judith Dutton Full Name (Last, First, Middle Initial) Mailing Address 279 Ely Avenue City Franklinville State NJ Zip Code 08322 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01878-01878 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
---	--	--

B. Danielle Garcia Full Name (Last, First, Middle Initial) Mailing Address 1141 Sheridan Avenue City Bellmawr State NJ Zip Code 08031 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01880-01880 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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C. Tarr Harris Full Name (Last, First, Middle Initial) Mailing Address 200 Mullica Hill Road City Glassboro State NJ Zip Code 08028 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01882-01882 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brian Kratky		Transaction ID: 30b-21-01884-01884 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1268 Robinson Terrace		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kaisha Mercado		Transaction ID: 30b-21-01886-01886 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 812 Tulip Street		Amount of Each Disbursement this Period 100.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tammy Mitchell		Transaction ID: 30b-21-01888-01888 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 11 Greendale Road		Amount of Each Disbursement this Period 150.00
City Newton State NJ Zip Code 07860	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maraud Pemberton		Transaction ID: 30b-21-01891-01891 Date of Disbursement 10 / 27 / 2006	
Mailing Address 26 Joseph Drive		Amount of Each Disbursement this Period 100.00	
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amaresh Vidyarthi		Transaction ID: 30b-21-01893-01893 Date of Disbursement 10 / 27 / 2006	
Mailing Address 33 Charles Street		Amount of Each Disbursement this Period 50.00	
City Carteret State NJ Zip Code 07008	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Richard Alua		Transaction ID: 30b-21-01894-01894 Date of Disbursement 10 / 27 / 2006	
Mailing Address 149 Ege		Amount of Each Disbursement this Period 235.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	385.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ruwhiy Barrow		Transaction ID: 30b-21-01895-01895 Date of Disbursement 10 / 27 / 2006
Mailing Address 218 Fulton Avenue		Amount of Each Disbursement this Period 230.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Reina Delacruz		Transaction ID: 30b-21-01896-01896 Date of Disbursement 10 / 27 / 2006
Mailing Address 358 Montgomery		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kevin Diggs		Transaction ID: 30b-21-01897-01897 Date of Disbursement 10 / 27 / 2006
Mailing Address 49 Clinton Avenue		Amount of Each Disbursement this Period 275.00
City Jersey City State NJ Zip Code 07304		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	705.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. James Diggs Full Name (Last, First, Middle Initial) Mailing Address 62 Rutgers Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01898-01898 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 245.00 Category/Type
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B. Thomasina Dunton Full Name (Last, First, Middle Initial) Mailing Address 51 Grant Avenue 2nd Floor City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01899-01899 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 270.00 Category/Type
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C. Lissette Ferreiro Full Name (Last, First, Middle Initial) Mailing Address 126 Paulison Avenue City Ridgefield Park State NJ Zip Code 07660 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01900-01900 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 560.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1075.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sherri Fletcher		Transaction ID: 30b-21-01901-01901 Date of Disbursement 10 / 27 / 2006	
Mailing Address 230 West 5th Avenue		Amount of Each Disbursement this Period 240.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dion Hardee		Transaction ID: 30b-21-01903-01903 Date of Disbursement 10 / 27 / 2006	
Mailing Address 218 Duncan Avenue		Amount of Each Disbursement this Period 185.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tiona Hawkins		Transaction ID: 30b-21-01904-01904 Date of Disbursement 10 / 27 / 2006	
Mailing Address 164 Streetegman Street		Amount of Each Disbursement this Period 250.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	675.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maria Javier		Transaction ID: 30b-21-01906-01906 Date of Disbursement 10 / 27 / 2006
Mailing Address 205 Monticello Avenue		Amount of Each Disbursement this Period 190.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Johnson		Transaction ID: 30b-21-01907-01907 Date of Disbursement 10 / 27 / 2006
Mailing Address 1712 Union Avenue		Amount of Each Disbursement this Period 180.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Travis Long		Transaction ID: 30b-21-01908-01908 Date of Disbursement 10 / 27 / 2006
Mailing Address 585 Bergan Ave bsmnt#2		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	470.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Yvette Manning Full Name (Last, First, Middle Initial) Mailing Address 34 Bleeker Street City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01909-01909 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 220.00 Category/Type
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B. Roosevelt McKinnie Full Name (Last, First, Middle Initial) Mailing Address 149 Claremont Avenue City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01910-01910 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 195.00 Category/Type
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C. Warren McKnight Full Name (Last, First, Middle Initial) Mailing Address 721 Grand Street City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01911-01911 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	515.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Chartryce Mullins Full Name (Last, First, Middle Initial) Mailing Address 134 Van Norstrand Avenue 2nd Floor City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01912-01912 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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B. Fuquan Mutalib Full Name (Last, First, Middle Initial) Mailing Address 7 Center Way City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01913-01913 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 335.00 Category/Type
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C. Deborah Norwood Full Name (Last, First, Middle Initial) Mailing Address 52 South Walnut Street City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01914-01914 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 430.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	895.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jeanette Nunez		Transaction ID: 30b-21-01915-01915 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 190 VanNostrand Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Nicolas Ortiz		Transaction ID: 30b-21-01916-01916 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 619 Grove Street		Amount of Each Disbursement this Period 175.00
City Jersey City State NJ Zip Code 07310	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Walter Payton		Transaction ID: 30b-21-01917-01917 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 391 Forrest Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. James Perez Full Name (Last, First, Middle Initial) Mailing Address 230 Pine Street City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01918-01918 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Frederick Phelps Full Name (Last, First, Middle Initial) Mailing Address 153 Myrtle Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01919-01919 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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C. Joyce Praylow Full Name (Last, First, Middle Initial) Mailing Address 62 Rutgers Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01920-01920 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 245.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stephon Reeves		Transaction ID: 30b-21-01922-01922 Date of Disbursement 10 / 27 / 2006
Mailing Address 145 Dwight Street		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jacklyn Richardson		Transaction ID: 30b-21-01923-01923 Date of Disbursement 10 / 27 / 2006
Mailing Address 346 Princeton Avenue		Amount of Each Disbursement this Period 185.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kenneth Rowe		Transaction ID: 30b-21-01924-01924 Date of Disbursement 10 / 27 / 2006
Mailing Address 61 North Arlington Avenue		Amount of Each Disbursement this Period 80.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	415.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Paul Sinclair Full Name (Last, First, Middle Initial) Mailing Address 55 Atlantic Ave City Jersey City State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01925-01925 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. R Wali Sloan Full Name (Last, First, Middle Initial) Mailing Address 5 Whitney Place Apt 22 City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01926-01926 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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C. Markee Smith Full Name (Last, First, Middle Initial) Mailing Address 112 Bostwick Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01927-01927 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	420.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eugene Streeter		Transaction ID: 30b-21-01928-01928 Date of Disbursement 10 / 27 / 2006
Mailing Address 143 Fulton Avenue		Amount of Each Disbursement this Period 145.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Yasheida Taylor		Transaction ID: 30b-21-01929-01929 Date of Disbursement 10 / 27 / 2006
Mailing Address 754 Communipaw Avenue		Amount of Each Disbursement this Period 140.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Nyeisha Thompson		Transaction ID: 30b-21-01930-01930 Date of Disbursement 10 / 27 / 2006
Mailing Address 240 Clerk Street		Amount of Each Disbursement this Period 270.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	555.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dawn Thornton		Transaction ID: 30b-21-01931-01931 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1 Waterview Drive		Amount of Each Disbursement this Period 150.00	
City Lakewood State NJ Zip Code 08701	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Eric Turkowski		Transaction ID: 30b-21-01932-01932 Date of Disbursement 10 / 27 / 2006	
Mailing Address 59 54th Street		Amount of Each Disbursement this Period 560.00	
City West New York State NJ Zip Code 07093	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Keith Watkins		Transaction ID: 30b-21-01934-01934 Date of Disbursement 10 / 27 / 2006	
Mailing Address 103 Danforth Avenue		Amount of Each Disbursement this Period 180.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	890.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maurice Watson		Transaction ID: 30b-21-01935-01935 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1866 JFK Boulevard		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Linda Williams		Transaction ID: 30b-21-01936-01936 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 22 Belmont Avenue		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Halima Williams		Transaction ID: 30b-21-01937-01937 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 211 Orange Road		Amount of Each Disbursement this Period 350.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Hakim Williams Full Name (Last, First, Middle Initial) Mailing Address 80 High Street City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01938-01938 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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B. Janice Williams Full Name (Last, First, Middle Initial) Mailing Address 80 High Street City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01939-01939 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 450.00 Category/Type
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C. Javier Arroyo Full Name (Last, First, Middle Initial) Mailing Address 100 Montgomery Street Apartment 15 City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01940-01940 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Brodie		Transaction ID: 30b-21-01943-01943 Date of Disbursement 10 / 27 / 2006	
Mailing Address 36 Highland Avenue		Amount of Each Disbursement this Period 385.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Erick Camacho		Transaction ID: 30b-21-01944-01944 Date of Disbursement 10 / 27 / 2006	
Mailing Address 100 Montgomery Street Apt 24C		Amount of Each Disbursement this Period 370.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Stephanie Chavez		Transaction ID: 30b-21-01945-01945 Date of Disbursement 10 / 27 / 2006	
Mailing Address 10 North 11th Street		Amount of Each Disbursement this Period 160.00	
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	915.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vanessa Chavez		Transaction ID: 30b-21-01946-01946 Date of Disbursement 10 / 27 / 2006
Mailing Address 10 Nill Street		Amount of Each Disbursement this Period 360.00
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Yazmin Clemente		Transaction ID: 30b-21-01947-01947 Date of Disbursement 10 / 27 / 2006
Mailing Address 127 Charles Street		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Monica Compre		Transaction ID: 30b-21-01948-01948 Date of Disbursement 10 / 27 / 2006
Mailing Address 9 Fleet Street		Amount of Each Disbursement this Period 340.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Elizabeth De Jesus		Transaction ID: 30b-21-01949-01949 Date of Disbursement 10 / 27 / 2006
Mailing Address 73 Hancock Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07307	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Arsenia De Lumen		Transaction ID: 30b-21-01950-01950 Date of Disbursement 10 / 27 / 2006
Mailing Address 241 Virginia Avenue, Apt 2		Amount of Each Disbursement this Period 160.00
City Jersey City State NJ Zip Code 07304	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jennifer Flores		Transaction ID: 30b-21-01951-01951 Date of Disbursement 10 / 27 / 2006
Mailing Address 27 East 36th Street		Amount of Each Disbursement this Period 310.00
City Bayonne State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

770.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ada Fuentes		Transaction ID: 30b-21-01952-01952 Date of Disbursement 10 / 27 / 2006	
Mailing Address 111 Prospect Street, Apartment 1L		Amount of Each Disbursement this Period 250.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Christopher Greco		Transaction ID: 30b-21-01954-01954 Date of Disbursement 10 / 27 / 2006	
Mailing Address 181 Griffith Street		Amount of Each Disbursement this Period 320.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Antony Hage		Transaction ID: 30b-21-01955-01955 Date of Disbursement 10 / 27 / 2006	
Mailing Address 442 Lawn Ridge		Amount of Each Disbursement this Period 160.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	730.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Debbie Harris Full Name (Last, First, Middle Initial) Mailing Address 303 Jefferson Street City Hoboken State NJ Zip Code 07030 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01956-01956 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 450.00 Category/Type
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B. Samantha Hernandez Full Name (Last, First, Middle Initial) Mailing Address 319 Fairmount Avenue Apt. 1 City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01957-01957 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 290.00 Category/Type
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C. Francis Jorge Full Name (Last, First, Middle Initial) Mailing Address 630 Bergen Avenue City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01958-01958 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 290.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1030.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. David Laboy Full Name (Last, First, Middle Initial) Mailing Address 100 Montgomery Street Apt 11H City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01959-01959 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 410.00 Category/Type
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B. Sixto Marmol Full Name (Last, First, Middle Initial) Mailing Address 527 38th Street City Union City State NJ Zip Code 07087 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01960-01960 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 560.00 Category/Type
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C. Luz Navarro Full Name (Last, First, Middle Initial) Mailing Address 160 Broadway City Elizabeth State NJ Zip Code 07206 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01961-01961 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1330.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vanessa Normand		Transaction ID: 30b-21-01962-01962 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 210.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Carol Normand		Transaction ID: 30b-21-01963-01963 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 320.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joshua Padilla		Transaction ID: 30b-21-01964-01964 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 17 Beacon Avenue		Amount of Each Disbursement this Period 300.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	830.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joseph Pagan Full Name (Last, First, Middle Initial) Mailing Address 162 Third Street Apt 86 City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01965-01965 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 616.00 Category/Type
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B. Oscar Pena Full Name (Last, First, Middle Initial) Mailing Address 241 Virginia Avenue, Apt 2 City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01967-01967 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 160.00 Category/Type
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C. Robert Perry Full Name (Last, First, Middle Initial) Mailing Address 65 West 29th Street City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01968-01968 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1076.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Williams Quashawn		Transaction ID: 30b-21-01969-01969 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 581 Thomas Street		Amount of Each Disbursement this Period 160.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Janet Rambla		Transaction ID: 30b-21-01970-01970 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 396 20th Avenue		Amount of Each Disbursement this Period 160.00
City Paterson State NJ Zip Code 07513	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mary Rambla		Transaction ID: 30b-21-01971-01971 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 396 20th Avenue		Amount of Each Disbursement this Period 360.00
City Paterson State NJ Zip Code 07513	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	680.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Johanna Recinos Full Name (Last, First, Middle Initial) Mailing Address 7 Main Terrace City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01972-01972 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 260.00 Category/Type
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B. Gilberto Rogalski Full Name (Last, First, Middle Initial) Mailing Address 166 Grand Street City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01973-01973 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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C. Peter Rosario Full Name (Last, First, Middle Initial) Mailing Address 17 Gracie Road City East Hanover State NJ Zip Code 07936 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-01974-01974 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	860.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Frank Schmetz		Transaction ID: 30b-21-01975-01975 Date of Disbursement 10 / 27 / 2006	
Mailing Address 146 Carlton Avenue		Amount of Each Disbursement this Period 360.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ronell Surrell		Transaction ID: 30b-21-01976-01976 Date of Disbursement 10 / 27 / 2006	
Mailing Address 165 Grand Avenue		Amount of Each Disbursement this Period 100.00	
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Cinthya Toledo		Transaction ID: 30b-21-01977-01977 Date of Disbursement 10 / 27 / 2006	
Mailing Address 111 Lincoln Street		Amount of Each Disbursement this Period 330.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	790.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gianina Valdivieso		Transaction ID: 30b-21-01978-01978 Date of Disbursement 10 / 27 / 2006
Mailing Address 379 Manila Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jason Velante		Transaction ID: 30b-21-01979-01979 Date of Disbursement 10 / 27 / 2006
Mailing Address 300 Parsippany Road, Apt 24-O		Amount of Each Disbursement this Period 160.00
City Parsippany State NJ Zip Code 07054	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jake Yant		Transaction ID: 30b-21-01980-01980 Date of Disbursement 10 / 27 / 2006
Mailing Address 123 Ferry Street		Amount of Each Disbursement this Period 360.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	820.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Francis Yeager		Transaction ID: 30b-21-01981-01981 Date of Disbursement 10 / 27 / 2006
Mailing Address 105 Westover Place, Apt 6		Amount of Each Disbursement this Period 560.00
City West New York State NJ Zip Code 07093		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Harry Aceti		Transaction ID: 30b-21-01982-01982 Date of Disbursement 10 / 27 / 2006
Mailing Address 8 Highway Road		Amount of Each Disbursement this Period 350.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mary Ann Aceti		Transaction ID: 30b-21-01983-01983 Date of Disbursement 10 / 27 / 2006
Mailing Address 8 Highview Road		Amount of Each Disbursement this Period 350.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1260.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Martha Alicea		Transaction ID: 30b-21-01984-01984 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 175 New York Avenue		Amount of Each Disbursement this Period 250.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Monique Alvavado		Transaction ID: 30b-21-01985-01985 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 104 Corbin Avenue		Amount of Each Disbursement this Period 300.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Renee Azer		Transaction ID: 30b-21-01986-01986 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 528 Kennedy Boulevard 2nd Floor		Amount of Each Disbursement this Period 150.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Frederick Blors		Transaction ID: 30b-21-01987-01987 Date of Disbursement 10 / 27 / 2006
Mailing Address 42 Sycamore Road		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Raymond Burner		Transaction ID: 30b-21-01988-01988 Date of Disbursement 10 / 27 / 2006
Mailing Address 43 Clark Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Joseph Conte		Transaction ID: 30b-21-01989-01989 Date of Disbursement 10 / 27 / 2006
Mailing Address 204 Bartholdi Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jeffrey East		Transaction ID: 30b-21-01990-01990 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 75 Clark Avenue		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Heba Elghandor		Transaction ID: 30b-21-01991-01991 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 15 Marion Place		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Martin Ellison		Transaction ID: 30b-21-01992-01992 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 417 Avenue A		Amount of Each Disbursement this Period 520.00
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	870.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jeffrey Felusme		Transaction ID: 30b-21-01993-01993 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 70 Wade Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Nathaniel Ferguson		Transaction ID: 30b-21-01994-01994 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 69 Clarke Ave		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Donna Gallager		Transaction ID: 30b-21-01995-01995 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 800 Kearny Ave		Amount of Each Disbursement this Period 200.00
City Kearny State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. William Garretson		Transaction ID: 30b-21-01996-01996 Date of Disbursement 10 / 27 / 2006
Mailing Address 265 Cator Avenue		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Duane Hraska		Transaction ID: 30b-21-01997-01997 Date of Disbursement 10 / 27 / 2006
Mailing Address 229 East 28th Street		Amount of Each Disbursement this Period 300.00
City New York State NY Zip Code 10019		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Thomas Lambert		Transaction ID: 30b-21-01998-01998 Date of Disbursement 10 / 27 / 2006
Mailing Address 11 Jefferson Avenue		Amount of Each Disbursement this Period 350.00
City Jersey City State NJ Zip Code 07307		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juan Mateo Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-01999-01999 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 358 Montgomery Street		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B. Sean Matthias Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-02000-02000 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4 Skillman Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C. Daniel McMahon Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-02001-02001 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 62 Linden Avenue		Amount of Each Disbursement this Period 350.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anna Marie Meyers		Transaction ID: 30b-21-02002-02002 Date of Disbursement 10 / 27 / 2006	
Mailing Address 38 West 7th Street		Amount of Each Disbursement this Period 350.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Mooney		Transaction ID: 30b-21-02003-02003 Date of Disbursement 10 / 27 / 2006	
Mailing Address 31 West 31st Street		Amount of Each Disbursement this Period 230.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Robert Motcera		Transaction ID: 30b-21-02004-02004 Date of Disbursement 10 / 27 / 2006	
Mailing Address 7 Clark Avenue		Amount of Each Disbursement this Period 350.00	
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	930.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jaby Paul Full Name (Last, First, Middle Initial) Mailing Address 33 Swan Street City Palisades State NY Zip Code 10964 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02005-02005 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 560.00 Category/Type
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B. Margaret Pilla Full Name (Last, First, Middle Initial) Mailing Address 23 Harvard Place City Belleville State NJ Zip Code 07109 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02006-02006 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. Nancy Rojas Full Name (Last, First, Middle Initial) Mailing Address 102 Romaine Ave City Jersey City State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02007-02007 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	910.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Yeris Romero Full Name (Last, First, Middle Initial) Mailing Address 407 3rd Street City Union City State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02008-02008 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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B. Steven Sanlino Full Name (Last, First, Middle Initial) Mailing Address 192 Central Avenue City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02009-02009 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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C. Thomas Sheridan Full Name (Last, First, Middle Initial) Mailing Address 95 Courthouse Place City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02010-02010 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 410.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	960.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Grace Shokr		Transaction ID: 30b-21-02011-02011 Date of Disbursement 10 / 27 / 2006
Mailing Address 104 Fairview Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Paul Silletti		Transaction ID: 30b-21-02012-02012 Date of Disbursement 10 / 27 / 2006
Mailing Address 264 Neptune Avenue		Amount of Each Disbursement this Period 300.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Rayen Sipes		Transaction ID: 30b-21-02013-02013 Date of Disbursement 10 / 27 / 2006
Mailing Address 175 West 49th Street		Amount of Each Disbursement this Period 200.00
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Sharon Soekhrum Full Name (Last, First, Middle Initial) Mailing Address 62 Wright Avenue City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02014-02014 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Mairam Sow Full Name (Last, First, Middle Initial) Mailing Address 14 1/2 Corbin Ave City Jersey City State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02015-02015 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Gloria Stauss Full Name (Last, First, Middle Initial) Mailing Address 58 Cottage Street City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02016-02016 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Maurice Wayne</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 49 Gardner Avenue</p> <p>City Jersey City State NJ Zip Code 07304</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-02017-02017</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>
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<p>B. Alderick Williams</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 281 Claremont Avenue</p> <p>City Jersey City State NJ Zip Code 07305</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-02018-02018</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
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<p>C. Sharon Godett</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 322</p> <p>City Trenton State NJ Zip Code 08603</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-02021-02021</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="370.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joanne Hicks Full Name (Last, First, Middle Initial) Mailing Address 6-1 Fairway Drive City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02022-02022 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Mattie Horton Full Name (Last, First, Middle Initial) Mailing Address 70 North Clinton Avenue Apt 84 A City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02023-02023 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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C. Kevin Hugh Full Name (Last, First, Middle Initial) Mailing Address 9 Stretton Circle City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02024-02024 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 20.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shari Kerr		Transaction ID: 30b-21-02025-02025 Date of Disbursement 10 / 27 / 2006
Mailing Address 20 Linden Avenue		Amount of Each Disbursement this Period 80.00
City Montclair State NJ Zip Code 07042	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Guss Magby		Transaction ID: 30b-21-02026-02026 Date of Disbursement 10 / 27 / 2006
Mailing Address 70 North Clinton Avenue Apt 84 A		Amount of Each Disbursement this Period 20.00
City Trenton State NJ Zip Code 08609	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Chastity Manning		Transaction ID: 30b-21-02027-02027 Date of Disbursement 10 / 27 / 2006
Mailing Address 802 Hoffman Avenue		Amount of Each Disbursement this Period 60.00
City Trenton State NJ Zip Code 08618	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Rena Maske</p>		<p>Transaction ID: 30b-21-02029-02029 Date of Disbursement</p>	
<p>Mailing Address 455 Hamilton Avenue, # 5</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City State Zip Code Trenton NJ 08609</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Ishmael Raines</p>		<p>Transaction ID: 30b-21-02032-02032 Date of Disbursement</p>	
<p>Mailing Address 362 Oakland Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City State Zip Code Trenton NJ 08618</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="90.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Jan Stokes</p>		<p>Transaction ID: 30b-21-02033-02033 Date of Disbursement</p>	
<p>Mailing Address 27 North Clinton Avenue, Apt 209</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City State Zip Code Trenton NJ 08609</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="220.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Medina Wilson		Transaction ID: 30b-21-02035-02035 Date of Disbursement 10 / 27 / 2006
Mailing Address 2-2 Fairway Drive		Amount of Each Disbursement this Period 20.00
City Trenton State NJ Zip Code 08618		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Destiny Alexander		Transaction ID: 30b-21-02037-02037 Date of Disbursement 10 / 27 / 2006
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 102.50
City Ewing State NJ Zip Code 08628		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Chase Anderson		Transaction ID: 30b-21-02039-02039 Date of Disbursement 10 / 27 / 2006
Mailing Address 207 Colonial Drive		Amount of Each Disbursement this Period 50.00
City Brick State NJ Zip Code 08724		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	172.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ana Bautista		Transaction ID: 30b-21-02042-02042 Date of Disbursement 10 / 27 / 2006
Mailing Address 415 Broadhead Place, Apt. #2		Amount of Each Disbursement this Period 90.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Treasure Brown		Transaction ID: 30b-21-02046-02046 Date of Disbursement 10 / 27 / 2006
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Katherine Campbell		Transaction ID: 30b-21-02049-02049 Date of Disbursement 10 / 27 / 2006
Mailing Address 2055 Lawrenceville Road		Amount of Each Disbursement this Period 332.00
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	472.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Deepa Cherla Full Name (Last, First, Middle Initial) Mailing Address 2000 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02051-02051 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Daphne Clausen Full Name (Last, First, Middle Initial) Mailing Address 264 S Liberty St City Hamilton State NJ Zip Code 08629 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02052-02052 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Christina Crapanzano Full Name (Last, First, Middle Initial) Mailing Address 75 Tar Lee Place City Staten Island State NY Zip Code 10308 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02053-02053 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Latrice Cunningham		Transaction ID: 30b-21-02055-02055 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Joshua Detzky		Transaction ID: 30b-21-02057-02057 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2 Manassas Court		Amount of Each Disbursement this Period 205.00
City Princeton Junction State NJ Zip Code 08550	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Anne Deus		Transaction ID: 30b-21-02058-02058 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 21 Oakmont Court		Amount of Each Disbursement this Period 50.00
City Lincroft State NJ Zip Code 07738	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	305.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Erin Duffy		Transaction ID: 30b-21-02059-02059 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 35.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sana Fathima		Transaction ID: 30b-21-02061-02061 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 52.50	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Eric Freda		Transaction ID: 30b-21-02062-02062 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 100.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	187.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sarah Gutschow		Transaction ID: 30b-21-02065-02065 Date of Disbursement 10 / 27 / 2006	
Mailing Address 56 Titus Avenue		Amount of Each Disbursement this Period 100.00	
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Zarif Islam		Transaction ID: 30b-21-02068-02068 Date of Disbursement 10 / 27 / 2006	
Mailing Address Ziegler A303 Rider University. PO		Amount of Each Disbursement this Period 100.00	
City Lawrenceville State NJ Zip Code 08638	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Brendan Kelly		Transaction ID: 30b-21-02069-02069 Date of Disbursement 10 / 27 / 2006	
Mailing Address 123 Fleming Way		Amount of Each Disbursement this Period 480.00	
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	680.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Glenn Kraemer		Transaction ID: 30b-21-02070-02070 Date of Disbursement 10 / 27 / 2006	
Mailing Address 23 Whitman Road		Amount of Each Disbursement this Period 480.00	
City Trenton	State NJ	Zip Code 08619	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Terrence Lang		Transaction ID: 30b-21-02071-02071 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 220.00	
City Ewing	State NJ	Zip Code 08628	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Kirrye' Majors		Transaction ID: 30b-21-02075-02075 Date of Disbursement 10 / 27 / 2006	
Mailing Address 39 Amherst Drive		Amount of Each Disbursement this Period 102.50	
City Burlington	State NJ	Zip Code 08016	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	802.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Shemea Marshall Full Name (Last, First, Middle Initial) Mailing Address 1300 Asbury Avenue Apt #10 City Asbury Park State NJ Zip Code 07712 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02076-02076 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 102.50 Category/Type
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B. Isaac Mireku Full Name (Last, First, Middle Initial) Mailing Address 2000 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02080-02080 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 52.50 Category/Type
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C. Joe Moore Full Name (Last, First, Middle Initial) Mailing Address 1584 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02082-02082 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	215.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Chris Norland		Transaction ID: 30b-21-02084-02084 Date of Disbursement 10 / 27 / 2006
Mailing Address 3 Stuyvesant Court		Amount of Each Disbursement this Period 85.00
City East Windsor State NJ Zip Code 08512	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Terry Oppong		Transaction ID: 30b-21-02087-02087 Date of Disbursement 10 / 27 / 2006
Mailing Address 1211 Robert Street Floor 1		Amount of Each Disbursement this Period 140.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Rachel Posner		Transaction ID: 30b-21-02089-02089 Date of Disbursement 10 / 27 / 2006
Mailing Address 11 Susan Avenue		Amount of Each Disbursement this Period 100.00
City Marlboro State NJ Zip Code 07746	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Leah Posner		Transaction ID: 30b-21-02090-02090 Date of Disbursement 10 / 27 / 2006	
Mailing Address 11 Susan Avenue		Amount of Each Disbursement this Period 100.00	
City Marlboro State NJ Zip Code 07746	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Scott Reieron		Transaction ID: 30b-21-02094-02094 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1 Ruthies Run		Amount of Each Disbursement this Period 60.00	
City West Windsor State NJ Zip Code 08550	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Andrew Roebing		Transaction ID: 30b-21-02096-02096 Date of Disbursement 10 / 27 / 2006	
Mailing Address 60 Brookstone Drive		Amount of Each Disbursement this Period 50.00	
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dorsa Seima		Transaction ID: 30b-21-02099-02099 Date of Disbursement 10 / 27 / 2006	
Mailing Address 928 West 6th Street		Amount of Each Disbursement this Period 100.00	
City Plainfield State NJ Zip Code 07060	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amanda Sexton		Transaction ID: 30b-21-02101-02101 Date of Disbursement 10 / 27 / 2006	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 35.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jason Smith		Transaction ID: 30b-21-02102-02102 Date of Disbursement 10 / 27 / 2006	
Mailing Address 267 Lynwood Avenue		Amount of Each Disbursement this Period 52.50	
City Hamilton State NJ Zip Code 08609	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	187.50
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sonya Spann		Transaction ID: 30b-21-02104-02104 Date of Disbursement 10 / 27 / 2006	
Mailing Address 186 Lexington Avenue		Amount of Each Disbursement this Period 35.00	
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nicholas Tyler		Transaction ID: 30b-21-02105-02105 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1215 Forge Road		Amount of Each Disbursement this Period 100.00	
City Cherry Hill State NJ Zip Code 08034	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rebekah Walker		Transaction ID: 30b-21-02108-02108 Date of Disbursement 10 / 27 / 2006	
Mailing Address 11 Leigh Avenue		Amount of Each Disbursement this Period 150.00	
City Princeton State NJ Zip Code 08542	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	285.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Krystal Wilkie		Transaction ID: 30b-21-02109-02109 Date of Disbursement 10 / 27 / 2006
Mailing Address 7 Hemlock Lane		Amount of Each Disbursement this Period 50.00
City Bayville State NJ Zip Code 08721	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Mikhail Zhuravlev		Transaction ID: 30b-21-02113-02113 Date of Disbursement 10 / 27 / 2006
Mailing Address 8 Jill Drive		Amount of Each Disbursement this Period 50.00
City West Windsor State NJ Zip Code 08550	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Christopher Zimbaldi		Transaction ID: 30b-21-02114-02114 Date of Disbursement 10 / 27 / 2006
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 170.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	270.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jeremiah Bonifacio		Transaction ID: 30b-21-02115-02115 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1053 Overlook Terrace		Amount of Each Disbursement this Period 200.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Daniel DeJesus		Transaction ID: 30b-21-02120-02120 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 128 Green Street		Amount of Each Disbursement this Period 270.00
City Somerville State NJ Zip Code 08876	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jessica Kwong		Transaction ID: 30b-21-02124-02124 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 371 Summit Avenue		Amount of Each Disbursement this Period 900.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1370.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Chuan Liang</p>		<p>Transaction ID: 30b-21-02128-02128 Date of Disbursement</p>	
<p>Mailing Address 87 Castleton</p>		<p><input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="06"/></p>	
<p>City Princeton</p>	<p>State NJ</p>	<p>Zip Code 08540</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>B. Full Name (Last, First, Middle Initial) Xiao-Yang Lin</p>		<p>Transaction ID: 30b-21-02129-02129 Date of Disbursement</p>	
<p>Mailing Address 800 Forest Avenue</p>		<p><input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="06"/></p>	
<p>City Westfield</p>	<p>State NJ</p>	<p>Zip Code 07090</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>C. Full Name (Last, First, Middle Initial) Cheng-I Ma</p>		<p>Transaction ID: 30b-21-02131-02131 Date of Disbursement</p>	
<p>Mailing Address 414 Central Avenue</p>		<p><input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="06"/></p>	
<p>City Harrison</p>	<p>State NJ</p>	<p>Zip Code 07029</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="840.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kuleen Mehta Full Name (Last, First, Middle Initial) Mailing Address 2523 Linn Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02132-02132 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 220.00 Category/Type
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B. Akshi Patel Full Name (Last, First, Middle Initial) Mailing Address 21 Minebrook Road, Apt 9A City Edison State NJ Zip Code 08820 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02134-02134 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Yogesh Patel Full Name (Last, First, Middle Initial) Mailing Address 1019 Adams Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02135-02135 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 280.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	740.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jimmy Quach		Transaction ID: 30b-21-02137-02137 Date of Disbursement 10 / 27 / 2006
Mailing Address 1726 Dekalb Avenue		Amount of Each Disbursement this Period 250.00
City Brooklyn State NY Zip Code 11237	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Renee Raghoo		Transaction ID: 30b-21-02138-02138 Date of Disbursement 10 / 27 / 2006
Mailing Address 435 79th Street		Amount of Each Disbursement this Period 640.00
City North Bergen State NJ Zip Code 07047	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Victor F Soliven		Transaction ID: 30b-21-02140-02140 Date of Disbursement 10 / 27 / 2006
Mailing Address 4 Washington Road		Amount of Each Disbursement this Period 200.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1090.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Henry Tsaur		Transaction ID: 30b-21-02142-02142 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 160 A Easton Avenue		Amount of Each Disbursement this Period 260.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Renato Valenzuela		Transaction ID: 30b-21-02143-02143 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 219 Summit Road		Amount of Each Disbursement this Period 960.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jessica Wu		Transaction ID: 30b-21-02149-02149 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2 Kramstail		Amount of Each Disbursement this Period 270.00
City Bound Brook State NJ Zip Code 05805	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1490.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 504 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) James Yi		Transaction ID: 30b-21-02151-02151 Date of Disbursement 10 / 27 / 2006
Mailing Address 405 Park Avenue		Amount of Each Disbursement this Period 110.00
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Jose Abreu		Transaction ID: 30b-21-02154-02154 Date of Disbursement 10 / 27 / 2006
Mailing Address 450 Division, 2nd Floor		Amount of Each Disbursement this Period 305.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Eduardo Ayala		Transaction ID: 30b-21-02155-02155 Date of Disbursement 10 / 27 / 2006
Mailing Address 23 Dino Drive		Amount of Each Disbursement this Period 265.00
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	680.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Edwin Ayala		Transaction ID: 30b-21-02156-02156 Date of Disbursement 10 / 27 / 2006
Mailing Address 5 Dino Drive		Amount of Each Disbursement this Period 300.00
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marbey Barcenas		Transaction ID: 30b-21-02157-02157 Date of Disbursement 10 / 27 / 2006
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 460.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jose Batista		Transaction ID: 30b-21-02158-02158 Date of Disbursement 10 / 27 / 2006
Mailing Address 650 Katherine Avenue		Amount of Each Disbursement this Period 300.00
City Perth Amboy State NJ Zip Code 08865	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1060.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Willie Boswell		Transaction ID: 30b-21-02159-02159 Date of Disbursement 10 / 27 / 2006
Mailing Address 8106 Timberline Court		Amount of Each Disbursement this Period 200.00
City South Brunswick State NJ Zip Code 08852	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Reynaldo Caltitla		Transaction ID: 30b-21-02160-02160 Date of Disbursement 10 / 27 / 2006
Mailing Address 345 Townsend Street 2nd Floor		Amount of Each Disbursement this Period 205.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jesus Castillo		Transaction ID: 30b-21-02161-02161 Date of Disbursement 10 / 27 / 2006
Mailing Address 61 Kendall Drive		Amount of Each Disbursement this Period 275.00
City Parlin State NJ Zip Code 08859	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	680.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Austria Cuevas		Transaction ID: 30b-21-02162-02162 Date of Disbursement 10 / 27 / 2006
Mailing Address 507 Brace Avenue		Amount of Each Disbursement this Period 250.00
City Perth Amboy	State NJ Zip Code 08861	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. July J. Davila		Transaction ID: 30b-21-02163-02163 Date of Disbursement 10 / 27 / 2006
Mailing Address 37 Kendall Drive		Amount of Each Disbursement this Period 65.00
City Parlin	State NJ Zip Code 08859	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melvi Davila		Transaction ID: 30b-21-02164-02164 Date of Disbursement 10 / 27 / 2006
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 652.50
City Perth Amboy	State NJ Zip Code 08861	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	967.50
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maria De Leon		Transaction ID: 30b-21-02165-02165 Date of Disbursement 10 / 27 / 2006	
Mailing Address 450 Division		Amount of Each Disbursement this Period 300.00	
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Christian Estevez		Transaction ID: 30b-21-02166-02166 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1352 Murray Avenue		Amount of Each Disbursement this Period 600.00	
City Plainfield State NJ Zip Code 07060	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Yuridia Guzman		Transaction ID: 30b-21-02167-02167 Date of Disbursement 10 / 27 / 2006	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 260.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1160.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Genina Jimenez</p>		<p>Transaction ID: 30b-21-02168-02168 Date of Disbursement</p>
<p>Mailing Address 618 Hanson Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City Perth Amboy State NJ Zip Code 08861</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Jacqueline Lacayo</p>		<p>Transaction ID: 30b-21-02169-02169 Date of Disbursement</p>
<p>Mailing Address 251 Fulton Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City New Brunswick State NJ Zip Code 08901</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="330.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Miguel Lavalle</p>		<p>Transaction ID: 30b-21-02170-02170 Date of Disbursement</p>
<p>Mailing Address 115 Brighton Avenue, Apt. 4</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City Perth Amboy State NJ Zip Code 08861</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="630.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Reymundo Menes		Transaction ID: 30b-21-02171-02171 Date of Disbursement 10 / 27 / 2006
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 320.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gilberta Menes		Transaction ID: 30b-21-02172-02172 Date of Disbursement 10 / 27 / 2006
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 325.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Rufina Perez		Transaction ID: 30b-21-02173-02173 Date of Disbursement 10 / 27 / 2006
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 325.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	970.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stephanie Rosa		Transaction ID: 30b-21-02174-02174 Date of Disbursement 10 / 27 / 2006
Mailing Address 95 West Dewey Avenue		Amount of Each Disbursement this Period 350.00
City Wharton State NJ Zip Code 07885	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Juan C. Solis		Transaction ID: 30b-21-02176-02176 Date of Disbursement 10 / 27 / 2006
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 220.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Dwight Talavera		Transaction ID: 30b-21-02177-02177 Date of Disbursement 10 / 27 / 2006
Mailing Address 37 Kendall Drive		Amount of Each Disbursement this Period 165.00
City Parlin State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	735.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Magdalena Vasquez		Transaction ID: 30b-21-02178-02178 Date of Disbursement 10 / 27 / 2006
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 325.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jose Zegarra		Transaction ID: 30b-21-02179-02179 Date of Disbursement 10 / 27 / 2006
Mailing Address 129 Devon Street, Apartment 2		Amount of Each Disbursement this Period 200.00
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Oyediron Adelakun		Transaction ID: 30b-21-02182-02182 Date of Disbursement 10 / 27 / 2006
Mailing Address 8 Village Gate Road		Amount of Each Disbursement this Period 145.00
City Washington State NJ Zip Code 07882	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ruslan Aliev		Transaction ID: 30b-21-02183-02183 Date of Disbursement 10 / 27 / 2006
Mailing Address 338 Horizon Drive		Amount of Each Disbursement this Period 366.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Justin Alsbrook		Transaction ID: 30b-21-02184-02184 Date of Disbursement 10 / 27 / 2006
Mailing Address 7 Third Avenue		Amount of Each Disbursement this Period 60.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Christian Angeles		Transaction ID: 30b-21-02185-02185 Date of Disbursement 10 / 27 / 2006
Mailing Address 9 Winterberry Circle		Amount of Each Disbursement this Period 145.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	571.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Anis		Transaction ID: 30b-21-02186-02186	
Mailing Address 45 Lahiere Avenue		Date of Disbursement 10 / 27 / 2006	
City Edison	State NJ	Zip Code 08817	Amount of Each Disbursement this Period 480.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Sufia Azher		Transaction ID: 30b-21-02188-02188	
Mailing Address 84A Cedar Lane		Date of Disbursement 10 / 27 / 2006	
City Highland Park	State NJ	Zip Code 08904	Amount of Each Disbursement this Period 120.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Joshua Baker		Transaction ID: 30b-21-02189-02189	
Mailing Address 130 Bellmawr Ave.		Date of Disbursement 10 / 27 / 2006	
City Haddon Heights	State NJ	Zip Code 08035	Amount of Each Disbursement this Period 78.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ►

678.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Bharat Balan		Transaction ID: 30b-21-02191-02191 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 15418 CPO Way		Amount of Each Disbursement this Period 120.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B. Full Name (Last, First, Middle Initial) John Ball		Transaction ID: 30b-21-02192-02192 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 68 Park Avenue Apt. 405		Amount of Each Disbursement this Period 300.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C. Full Name (Last, First, Middle Initial) Michelle Ball		Transaction ID: 30b-21-02193-02193 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 68 Park Avenue Apartment 405		Amount of Each Disbursement this Period 180.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Susan Ball Full Name (Last, First, Middle Initial) Mailing Address 68 Park Avenue Apartment 405 City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02194-02194 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 756.00 Category/Type
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B. Jerome Blum Full Name (Last, First, Middle Initial) Mailing Address 408-9 Cranbury Road City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02197-02197 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Antonio Bowser Full Name (Last, First, Middle Initial) Mailing Address 5 Clifton Street City Somerset State NJ Zip Code 08873 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02200-02200 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 112.50 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	928.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nick Brener		Transaction ID: 30b-21-02201-02201 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 120.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William Brier		Transaction ID: 30b-21-02203-02203 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 18 Norman Street		Amount of Each Disbursement this Period 330.00	
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Daniel Brinamen		Transaction ID: 30b-21-02204-02204 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 235 Clinton Street		Amount of Each Disbursement this Period 60.00	
City Woodbridge State NJ Zip Code 07095	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	510.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vernee Brooks		Transaction ID: 30b-21-02205-02205 Date of Disbursement 10 / 27 / 2006	
Mailing Address 100 Roosevelt Avenue Apartment T2		Amount of Each Disbursement this Period 120.00	
City Carteret State NJ Zip Code 07008	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Tim Chen		Transaction ID: 30b-21-02207-02207 Date of Disbursement 10 / 27 / 2006	
Mailing Address 32250 Rpo Way		Amount of Each Disbursement this Period 120.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Yin Chu		Transaction ID: 30b-21-02208-02208 Date of Disbursement 10 / 27 / 2006	
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 120.00	
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ikeme Chukunta Full Name (Last, First, Middle Initial) Mailing Address 86 Harvey St. City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02209-02209 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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B. Jonathan Collado Full Name (Last, First, Middle Initial) Mailing Address 677 Wood Avenue City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02211-02211 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 450.00 Category/Type
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C. Tom Cotton Full Name (Last, First, Middle Initial) Mailing Address 6 Elizabeth Court City Sewell State NJ Zip Code 08080 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02213-02213 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	690.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Croker		Transaction ID: 30b-21-02214-02214 Date of Disbursement 10 / 27 / 2006
Mailing Address 769 Pequest Road		Amount of Each Disbursement this Period 120.00
City Oxford State NJ Zip Code 07863	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Monae Davis		Transaction ID: 30b-21-02218-02218 Date of Disbursement 10 / 27 / 2006
Mailing Address 34734 RPO Way		Amount of Each Disbursement this Period 60.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Marlo Diaz		Transaction ID: 30b-21-02219-02219 Date of Disbursement 10 / 27 / 2006
Mailing Address 65 Pennsylvania Way		Amount of Each Disbursement this Period 60.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Deyra Diril		Transaction ID: 30b-21-02220-02220 Date of Disbursement 10 / 27 / 2006	
Mailing Address 5 Dana Circle		Amount of Each Disbursement this Period 120.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Christopher Egan		Transaction ID: 30b-21-02223-02223 Date of Disbursement 10 / 27 / 2006	
Mailing Address 18 Handy Street		Amount of Each Disbursement this Period 120.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rachel Elfenbein		Transaction ID: 30b-21-02224-02224 Date of Disbursement 10 / 27 / 2006	
Mailing Address 20 Loweland Drive		Amount of Each Disbursement this Period 120.00	
City Mountain Lakes State NJ Zip Code 07046	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roland Englis		Transaction ID: 30b-21-02225-02225 Date of Disbursement 10 / 27 / 2006
Mailing Address 37 Agatha Drive		Amount of Each Disbursement this Period 120.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Robert Estor		Transaction ID: 30b-21-02226-02226 Date of Disbursement 10 / 27 / 2006
Mailing Address 43 Wellington Road		Amount of Each Disbursement this Period 325.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gary Feng		Transaction ID: 30b-21-02229-02229 Date of Disbursement 10 / 27 / 2006
Mailing Address 15 Rutledge Court		Amount of Each Disbursement this Period 325.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 523 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Allon Finezilber		Transaction ID: 30b-21-02231-02231 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 189 B Taylor Avenue		Amount of Each Disbursement this Period 145.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Aaron Forrest		Transaction ID: 30b-21-02232-02232 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 233 Bradford St		Amount of Each Disbursement this Period 120.00
City Everett State MA Zip Code 02149	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Ian Forrester		Transaction ID: 30b-21-02233-02233 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1769 West 5th		Amount of Each Disbursement this Period 60.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Arthur Galarza		Transaction ID: 30b-21-02236-02236 Date of Disbursement 10 / 27 / 2006
Mailing Address 460 Andover Place		Amount of Each Disbursement this Period 120.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Anderson Garcia		Transaction ID: 30b-21-02237-02237 Date of Disbursement 10 / 27 / 2006
Mailing Address 98 Welton Street		Amount of Each Disbursement this Period 408.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Conner Gill		Transaction ID: 30b-21-02241-02241 Date of Disbursement 10 / 27 / 2006
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 472.50
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.50
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Davion Gomez		Transaction ID: 30b-21-02245-02245 Date of Disbursement 10 / 27 / 2006	
Mailing Address 107 Vaughan Drive		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Lorenzo		Transaction ID: 30b-21-02290-02290 Date of Disbursement 10 / 27 / 2006	
Mailing Address 33 Hannah Drive		Amount of Each Disbursement this Period 240.00	
City Dayton State NJ Zip Code 08810	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dominic Mangonon		Transaction ID: 30b-21-02291-02291 Date of Disbursement 10 / 27 / 2006	
Mailing Address 93 Easton Avenue Apartment 1		Amount of Each Disbursement this Period 120.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	420.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kathryn Mecca		Transaction ID: 30b-21-02295-02295 Date of Disbursement 10 / 27 / 2006	
Mailing Address 32 Sawyer Court		Amount of Each Disbursement this Period 120.00	
City Allendale State NJ Zip Code 07401	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Thomas Mendez		Transaction ID: 30b-21-02297-02297 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1 Springdale Rd.		Amount of Each Disbursement this Period 60.00	
City Kendall Park State NJ Zip Code 08824	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Carl Metellus		Transaction ID: 30b-21-02298-02298 Date of Disbursement 10 / 27 / 2006	
Mailing Address 8 Tekening Way		Amount of Each Disbursement this Period 60.00	
City Hamilton State NJ Zip Code 08690	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael Morgan Full Name (Last, First, Middle Initial) Mailing Address 120 Cambridge Avenue City Plainfield State NJ Zip Code 07062 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02301-02301 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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B. Obioma Okere Full Name (Last, First, Middle Initial) Mailing Address 22519 RPO Wy City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02305-02305 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Lotanna Onuekwusi Full Name (Last, First, Middle Initial) Mailing Address 369 Park Avenue Apt. E 18 City Orange State NJ Zip Code 07050 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02306-02306 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 325.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	925.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ebers Ortega		Transaction ID: 30b-21-02307-02307 Date of Disbursement 10 / 27 / 2006
Mailing Address 400 68th St.		Amount of Each Disbursement this Period 240.00
City Guttenberg	State NJ Zip Code 07093	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Ramon Paredes		Transaction ID: 30b-21-02311-02311 Date of Disbursement 10 / 27 / 2006
Mailing Address 288 Commercial Avenue		Amount of Each Disbursement this Period 180.00
City New Brunswick	State NJ Zip Code 08901	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Brenda Parker		Transaction ID: 30b-21-02313-02313 Date of Disbursement 10 / 27 / 2006
Mailing Address 696B Cranbury Cross Road		Amount of Each Disbursement this Period 660.00
City North Brunswick	State NJ Zip Code 08902	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1080.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 529 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Sheshang Patel</p>		<p>Transaction ID: 30b-21-02315-02315 Date of Disbursement</p>
<p>Mailing Address 37103 RPO Wy</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City New Brunswick State NJ Zip Code 08901</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) John Prignano</p>		<p>Transaction ID: 30b-21-02316-02316 Date of Disbursement</p>
<p>Mailing Address 118 Huntington Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City New Brunswick State NJ Zip Code 08901</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="140.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Patrick Pryor</p>		<p>Transaction ID: 30b-21-02317-02317 Date of Disbursement</p>
<p>Mailing Address 5 High Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City Helmetta State NJ Zip Code 08828</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="72.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="332.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 530 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tahira Rafiq		Transaction ID: 30b-21-02318-02318 Date of Disbursement 10 / 27 / 2006
Mailing Address 1 Lisa Court		Amount of Each Disbursement this Period 120.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Scott Reis		Transaction ID: 30b-21-02321-02321 Date of Disbursement 10 / 27 / 2006
Mailing Address 5 Charlemagne Place		Amount of Each Disbursement this Period 60.00
City Pine Brook State NJ Zip Code 07058	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Richard Reyes		Transaction ID: 30b-21-02322-02322 Date of Disbursement 10 / 27 / 2006
Mailing Address 36 Sandhill Road		Amount of Each Disbursement this Period 180.00
City Kendall Park State NJ Zip Code 08824	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	360.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Chris Rios Full Name (Last, First, Middle Initial) Mailing Address 13 York Avenue City Port Monmouth State NJ Zip Code 07758 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02323-02323 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Matthew Rivera Full Name (Last, First, Middle Initial) Mailing Address 1465 Thomas Avenue City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02324-02324 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Christian Rocha Full Name (Last, First, Middle Initial) Mailing Address 36 Quentin Avenue City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02327-02327 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 325.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	445.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lauren Russell Park		Transaction ID: 30b-21-02328-02328 Date of Disbursement 10 / 27 / 2006
Mailing Address 323D Crowells Road		Amount of Each Disbursement this Period 97.50
City Highland Park State NJ Zip Code 08904		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Ryan Sales		Transaction ID: 30b-21-02329-02329 Date of Disbursement 10 / 27 / 2006
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 780.00
City East Brunswick State NJ Zip Code 08816		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Tanya Santiago		Transaction ID: 30b-21-02330-02330 Date of Disbursement 10 / 27 / 2006
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 180.00
City Somerset State NJ Zip Code 08873		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1057.50
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Neelam Sarwar		Transaction ID: 30b-21-02331-02331 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1609 Westminster Blvd.		Amount of Each Disbursement this Period 60.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Paul Scott		Transaction ID: 30b-21-02332-02332 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 196 Oakland Avenue		Amount of Each Disbursement this Period 372.00
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Nedje Severe		Transaction ID: 30b-21-02333-02333 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 595 Jefferson Avenue		Amount of Each Disbursement this Period 120.00
City Elizabeth State NJ Zip Code 07201	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	552.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nia Shabazz		Transaction ID: 30b-21-02334-02334 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1102 Woodhaven Drive		Amount of Each Disbursement this Period 1000.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nia Shabazz		Transaction ID: 30b-21-02335-02335 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1102 Woodhaven Drive		Amount of Each Disbursement this Period 104.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Oba Simmonds		Transaction ID: 30b-21-02338-02338 Date of Disbursement 10 / 27 / 2006	
Mailing Address 88 Freemont Court		Amount of Each Disbursement this Period 300.00	
City Somerset State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1404.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ilya Slavinski		Transaction ID: 30b-21-02340-02340 Date of Disbursement 10 / 27 / 2006
Mailing Address 6 Armstrong Avenue		Amount of Each Disbursement this Period 204.00
City Wayne State NJ Zip Code 07470	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Richard Spellman		Transaction ID: 30b-21-02343-02343 Date of Disbursement 10 / 27 / 2006
Mailing Address 118 North Maple Avenue		Amount of Each Disbursement this Period 408.00
City East Orange State NJ Zip Code 07017	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Karen Stallings		Transaction ID: 30b-21-02345-02345 Date of Disbursement 10 / 27 / 2006
Mailing Address 1045 Grove Avenue Apartment 13J		Amount of Each Disbursement this Period 60.00
City Edison State NJ Zip Code 08820	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	672.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jorge Tapia		Transaction ID: 30b-21-02346-02346 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 3 Park Place		Amount of Each Disbursement this Period 180.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Gerald Terrell		Transaction ID: 30b-21-02347-02347 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 33 Commercial Avenue Apt. 60		Amount of Each Disbursement this Period 348.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Chris Tomlinson		Transaction ID: 30b-21-02349-02349 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 20 Terrace Court		Amount of Each Disbursement this Period 60.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	588.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tiana Tucker		Transaction ID: 30b-21-02350-02350 Date of Disbursement 10 / 27 / 2006	
Mailing Address 30 Hana Road		Amount of Each Disbursement this Period 258.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sapaksh Vij		Transaction ID: 30b-21-02353-02353 Date of Disbursement 10 / 27 / 2006	
Mailing Address 95 East Flagge St.		Amount of Each Disbursement this Period 120.00	
City Rockaway State NJ Zip Code 07866	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mara Villanueva		Transaction ID: 30b-21-02354-02354 Date of Disbursement 10 / 27 / 2006	
Mailing Address 14 Crossgate Road		Amount of Each Disbursement this Period 120.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	498.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Evan Waltzer Full Name (Last, First, Middle Initial) Mailing Address 68 Marc Dr. City Dayton State NJ Zip Code 08810 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02357-02357 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Li Wang Full Name (Last, First, Middle Initial) Mailing Address 36 Christian Drive City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02359-02359 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 180.00 Category/Type
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C. Brett Warnebold Full Name (Last, First, Middle Initial) Mailing Address 148 Baron Lane City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02360-02360 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 700.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	940.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sherry White		Transaction ID: 30b-21-02361-02361 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 181 Redmond Street		Amount of Each Disbursement this Period 606.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Demar Whyte		Transaction ID: 30b-21-02362-02362 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 17295 CPO Way		Amount of Each Disbursement this Period 180.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Alex C. Williams		Transaction ID: 30b-21-02363-02363 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 192 Evesham Road		Amount of Each Disbursement this Period 120.00	
City Cherry Hill State NJ Zip Code 08003	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	906.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Brian Williams Full Name (Last, First, Middle Initial) Mailing Address 34 Pin Oak Drive City Lawrenceville State NJ Zip Code 08648 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02364-02364 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 30.00 Category/Type
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B. Ebony Williams Full Name (Last, First, Middle Initial) Mailing Address 40 Quentin Avenue City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02365-02365 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Alexander Winters Full Name (Last, First, Middle Initial) Mailing Address 53 Locust Grove City Hazlet State NJ Zip Code 07730 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02367-02367 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	330.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 541 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel Winters		Transaction ID: 30b-21-02368-02368 Date of Disbursement 10 / 27 / 2006
Mailing Address 79 Harmon Road		Amount of Each Disbursement this Period 282.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kenneth Woods		Transaction ID: 30b-21-02369-02369 Date of Disbursement 10 / 27 / 2006
Mailing Address 173 Throop Avenue		Amount of Each Disbursement this Period 714.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Drew Worthington		Transaction ID: 30b-21-02370-02370 Date of Disbursement 10 / 27 / 2006
Mailing Address 35 Forest Glen Drive		Amount of Each Disbursement this Period 300.00
City Highland Park State NJ Zip Code 08904	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1296.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Brendan Cassidy Full Name (Last, First, Middle Initial) Mailing Address 122 Huntington Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02372-02372 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 210.00 Category/Type
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B. Kevin Fortkiewicz Full Name (Last, First, Middle Initial) Mailing Address 16 Clover Lane City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02373-02373 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 400.00 Category/Type
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C. Cassandra Camon Full Name (Last, First, Middle Initial) Mailing Address 357 Girard Avenue City Somerset State NJ Zip Code 08873 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02378-02378 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

860.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clarimel Cepeda		Transaction ID: 30b-21-02380-02380 Date of Disbursement 10 / 27 / 2006
Mailing Address 65 Ampere Parkway		Amount of Each Disbursement this Period 516.75
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jon Cusack		Transaction ID: 30b-21-02382-02382 Date of Disbursement 10 / 27 / 2006
Mailing Address 6 Taylor Road		Amount of Each Disbursement this Period 120.00
City Princeton State NJ Zip Code 08540		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Jerry Ford		Transaction ID: 30b-21-02384-02384 Date of Disbursement 10 / 27 / 2006
Mailing Address 1179 East 13 Mile Road		Amount of Each Disbursement this Period 260.00
City Warren State MI Zip Code 40893		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	896.75
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jamila Ford		Transaction ID: 30b-21-02385-02385 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1 A - B May Street		Amount of Each Disbursement this Period 329.20	
City New Brunswick	State NJ	Zip Code 08901	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) B. Abdul Glover		Transaction ID: 30b-21-02387-02387 Date of Disbursement 10 / 27 / 2006	
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 480.00	
City New Brunswick	State NJ	Zip Code 08901	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) C. Porche Hardy		Transaction ID: 30b-21-02389-02389 Date of Disbursement 10 / 27 / 2006	
Mailing Address 290 George Street Apt 309		Amount of Each Disbursement this Period 120.00	
City New Brunswick	State NJ	Zip Code 08901	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	929.20
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Giselle Herrera Full Name (Last, First, Middle Initial) Mailing Address 26870 DPO Way City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02390-02390 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 210.00 Category/Type
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B. Samuel Pegram Full Name (Last, First, Middle Initial) Mailing Address 4702 Rockwood Drive City Houston State TX Zip Code 77004 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02396-02396 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 245.00 Category/Type
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C. Cali Smith Full Name (Last, First, Middle Initial) Mailing Address 510 McCandless Street City Linden State NJ Zip Code 07036 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02399-02399 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 363.40 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	818.40
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Isaiah Tate		Transaction ID: 30b-21-02400-02400 Date of Disbursement 10 / 27 / 2006	
Mailing Address 138 Jones Avenue		Amount of Each Disbursement this Period 300.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dalandra Epting		Transaction ID: 30b-21-02404-02404 Date of Disbursement 10 / 27 / 2006	
Mailing Address 25 Joyce Kimer Avenue, Apt. 2, P.O		Amount of Each Disbursement this Period 275.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Shanae Abrams		Transaction ID: 30b-21-02405-02405 Date of Disbursement 10 / 27 / 2006	
Mailing Address 3-6 Christina Place		Amount of Each Disbursement this Period 40.00	
City Paterson State NJ Zip Code 07502	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	615.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Patrice Abrams		Transaction ID: 30b-21-02406-02406 Date of Disbursement 10 / 27 / 2006
Mailing Address 3-6 Christina Place		Amount of Each Disbursement this Period 40.00
City Paterson State NJ Zip Code 07502	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Cecile Aponte		Transaction ID: 30b-21-02407-02407 Date of Disbursement 10 / 27 / 2006
Mailing Address 220 Kearney Street		Amount of Each Disbursement this Period 320.00
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Rudy Cotton		Transaction ID: 30b-21-02411-02411 Date of Disbursement 10 / 27 / 2006
Mailing Address 446 East 27th Street		Amount of Each Disbursement this Period 70.00
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	430.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gloria Donarye		Transaction ID: 30b-21-02412-02412 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 460 Paxton Street		Amount of Each Disbursement this Period 40.00
City Paterson State NJ Zip Code 07522		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Darryl Perkins		Transaction ID: 30b-21-02413-02413 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 101 N-4th Street.		Amount of Each Disbursement this Period 90.00
City Paterson State NJ Zip Code 07522		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lawrence Smith		Transaction ID: 30b-21-02414-02414 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 48 Colonial Avenue		Amount of Each Disbursement this Period 90.00
City Paterson State NJ Zip Code 07502		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Barry Smith Full Name (Last, First, Middle Initial) Mailing Address 6-2 Christina Place City Paterson State NJ Zip Code 07502 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02415-02415 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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B. Gwendolyn William Full Name (Last, First, Middle Initial) Mailing Address 27 North 4th Street City Paterson State NJ Zip Code 07522 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02418-02418 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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C. Fawn William Full Name (Last, First, Middle Initial) Mailing Address 27 N-4th Street. City Paterson State NJ Zip Code 07522 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02419-02419 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 30.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Latoya D Williams</p>		<p>Transaction ID: 30b-21-02420-02420 Date of Disbursement</p>	
<p>Mailing Address 184 Lawrence Place</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>	
<p>City Paterson State NJ Zip Code 07501</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) James E Williams</p>		<p>Transaction ID: 30b-21-02421-02421 Date of Disbursement</p>	
<p>Mailing Address 400 Broadway Apartment 2C</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>	
<p>City Paterson State NJ Zip Code 07501</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="40.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Watkina Aquino</p>		<p>Transaction ID: 30b-21-02422-02422 Date of Disbursement</p>	
<p>Mailing Address 82 Pennington Avenue Apartment 2L</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>	
<p>City Passaic State NJ Zip Code 07055</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="370.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Chanelle Arambulo Full Name (Last, First, Middle Initial) Mailing Address 150 Harrison Street #2 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02423-02423 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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B. Bianca Arambulo Full Name (Last, First, Middle Initial) Mailing Address 150 Harrison Street #2 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02424-02424 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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C. Jamie Baez Full Name (Last, First, Middle Initial) Mailing Address 54 Myrtle Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02425-02425 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Emmanuel Cabrera		Transaction ID: 30b-21-02426-02426 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 117 8th Street		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Jorge Canarte		Transaction ID: 30b-21-02427-02427 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 63 Trimble Avenue		Amount of Each Disbursement this Period 150.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Edward Capellan		Transaction ID: 30b-21-02428-02428 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 7-9 3rd Street #12		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jhon Cardona		Transaction ID: 30b-21-02429-02429 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 437 Howe Avenue		Amount of Each Disbursement this Period 550.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Rosa Carrillo		Transaction ID: 30b-21-02430-02430 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 90 Clifton Avenue Apartment 2		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Ana Carvajal		Transaction ID: 30b-21-02431-02431 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 26 Grace Avenue		Amount of Each Disbursement this Period 150.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Cespedes		Transaction ID: 30b-21-02432-02432 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 250 Harrison Street #2B		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JONATHAN COLON		Transaction ID: 30b-21-02433-02433 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 74 Bloomfield Avenue		Amount of Each Disbursement this Period 300.00
City Paterson State NJ Zip Code 07513	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JEAN CORDERO		Transaction ID: 30b-21-02434-02434 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 9 Rosz Place		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 555 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angel Cruz		Transaction ID: 30b-21-02435-02435 Date of Disbursement 10 / 27 / 2006	
Mailing Address 15 Sherman Street		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Roddy Deleon		Transaction ID: 30b-21-02436-02436 Date of Disbursement 10 / 27 / 2006	
Mailing Address 16363 Bristol Lake Circle		Amount of Each Disbursement this Period 350.00	
City Orlando State FL Zip Code 32828	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RICHARD DIAZ		Transaction ID: 30b-21-02437-02437 Date of Disbursement 10 / 27 / 2006	
Mailing Address 44 Aycrigg Avenue		Amount of Each Disbursement this Period 350.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Luz Figuero		Transaction ID: 30b-21-02438-02438 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 46 Sherman Street 2nd Floor		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Sully Garcia		Transaction ID: 30b-21-02439-02439 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 381 Harrison Street		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Yurissa Garcia		Transaction ID: 30b-21-02440-02440 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 318 Lafayette Avenue, Apt C14		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ricardo Gomez		Transaction ID: 30b-21-02441-02441 Date of Disbursement 10 / 27 / 2006
Mailing Address 3 Lucille Place #12		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Richie Gonzalez		Transaction ID: 30b-21-02442-02442 Date of Disbursement 10 / 27 / 2006
Mailing Address 106 Lexington Avenue		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Pedro Gonzalez		Transaction ID: 30b-21-02443-02443 Date of Disbursement 10 / 27 / 2006
Mailing Address 123 Passaic Street #3		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Luis Goris Full Name (Last, First, Middle Initial) Mailing Address 177 8th Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02444-02444 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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B. Michelle Hernandez Full Name (Last, First, Middle Initial) Mailing Address 12 Martha Place City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02445-02445 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Ysabel Hernandez Full Name (Last, First, Middle Initial) Mailing Address 293 Paulison Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02446-02446 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Samuel Holguin Full Name (Last, First, Middle Initial) Mailing Address 106 Sherman Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02447-02447 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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B. Frank Lantigua Full Name (Last, First, Middle Initial) Mailing Address 7-9 3rd Street, Apartment 4 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02449-02449 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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C. Sabrina Martinez Full Name (Last, First, Middle Initial) Mailing Address 18 Federal Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02450-02450 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Johnny Martinez Full Name (Last, First, Middle Initial) Mailing Address 204 President Street #220 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02451-02451 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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B. Lully Mendez Full Name (Last, First, Middle Initial) Mailing Address 27 Ann Street, Apartment 6 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02452-02452 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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C. Fior Menier Full Name (Last, First, Middle Initial) Mailing Address 498 Boulevard City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02453-02453 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Russell Milligan Full Name (Last, First, Middle Initial) Mailing Address 24 State Street, Apartment 2C City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02454-02454 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Juan Carlos Mota Full Name (Last, First, Middle Initial) Mailing Address 233 Monroe Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02455-02455 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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C. Felix Nunez Full Name (Last, First, Middle Initial) Mailing Address 60 Jackson Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02456-02456 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. ISMEL PENA		Transaction ID: 30b-21-02457-02457 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 230 3rd Street		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Yerly Perdomo		Transaction ID: 30b-21-02458-02458 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 18 Federal Street		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Angel Perez		Transaction ID: 30b-21-02459-02459 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 58 Howe Avenue, Apartment 15		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keny Perez		Transaction ID: 30b-21-02460-02460 Date of Disbursement 10 / 27 / 2006
Mailing Address 99 Gregory Avenue, Apartment A-2		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marino Polanco		Transaction ID: 30b-21-02461-02461 Date of Disbursement 10 / 27 / 2006
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Vickiana Polanco		Transaction ID: 30b-21-02462-02462 Date of Disbursement 10 / 27 / 2006
Mailing Address 227 Monroe Street		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Diana Polanco		Transaction ID: 30b-21-02463-02463 Date of Disbursement 10 / 27 / 2006	
Mailing Address 32 Myrtle Avenue, Apartment 5		Amount of Each Disbursement this Period 350.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Ely Polanco		Transaction ID: 30b-21-02464-02464 Date of Disbursement 10 / 27 / 2006	
Mailing Address 242 Totowa Road		Amount of Each Disbursement this Period 350.00	
City Totowa State NJ Zip Code 07512	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Lilianny Ramos		Transaction ID: 30b-21-02465-02465 Date of Disbursement 10 / 27 / 2006	
Mailing Address 61 Irving Place		Amount of Each Disbursement this Period 150.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 565 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Deivis Reyes		Transaction ID: 30b-21-02466-02466 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 147 Summer Street		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Michael Rivera		Transaction ID: 30b-21-02468-02468 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 53 Park Avenue Apt 2		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Carlos Rodriguez		Transaction ID: 30b-21-02469-02469 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 100 Passaic Street Apt 4G		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. MIGUEL RODRIGUEZ		Transaction ID: 30b-21-02470-02470 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 66 Getty Avenue		Amount of Each Disbursement this Period 250.00
City Clifton State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Roberto Rosario		Transaction ID: 30b-21-02472-02472 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 177 Eight Street		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Joel Rufino		Transaction ID: 30b-21-02473-02473 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 20 4th Street		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tiffany Rutherford		Transaction ID: 30b-21-02474-02474 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 297 Chestnut Street		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Cesar Santana		Transaction ID: 30b-21-02475-02475 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 272 Hope Avenue		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Lina Serna		Transaction ID: 30b-21-02476-02476 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 23 Passaic Avenue #D9		Amount of Each Disbursement this Period 300.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. CARLYS SEVERINO		Transaction ID: 30b-21-02477-02477 Date of Disbursement 10 / 27 / 2006	
Mailing Address 23 Passaic Avenue #D9		Amount of Each Disbursement this Period 300.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Alfonso Siri		Transaction ID: 30b-21-02478-02478 Date of Disbursement 10 / 27 / 2006	
Mailing Address 381 Lafayette Avenue, Apartment 3		Amount of Each Disbursement this Period 150.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Yudis Siri		Transaction ID: 30b-21-02479-02479 Date of Disbursement 10 / 27 / 2006	
Mailing Address 188 Myrtle Avenue		Amount of Each Disbursement this Period 300.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mennio Soto		Transaction ID: 30b-21-02480-02480 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 20 Henderson Street		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Domingo Tejada		Transaction ID: 30b-21-02482-02482 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 106 Passaic Street, Apartment 2		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gira Tejada		Transaction ID: 30b-21-02483-02483 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 570 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juliany Toribio Full Name (Last, First, Middle Initial) Mailing Address 194 8th Street Apartment 1 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02485-02485 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Joel Toribio Full Name (Last, First, Middle Initial) Mailing Address 194 8th Street Apartment 1 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02486-02486 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Alexander Urban Full Name (Last, First, Middle Initial) Mailing Address 324 Pennington Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02488-02488 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aladino Urban		Transaction ID: 30b-21-02489-02489 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Jason Urban		Transaction ID: 30b-21-02490-02490 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 450.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Alex Valenzuela		Transaction ID: 30b-21-02491-02491 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 109 Keningston Terrace		Amount of Each Disbursement this Period 400.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Francisco Vallejo		Transaction ID: 30b-21-02492-02492 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 162 Gregory Ave, #9		Amount of Each Disbursement this Period 200.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Joel Vargas		Transaction ID: 30b-21-02493-02493 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 39 Hammond Avenue #1		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Dahiana Vasquez		Transaction ID: 30b-21-02494-02494 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 53 Burgess Place		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carlos Vasquez		Transaction ID: 30b-21-02495-02495 Date of Disbursement 10 / 27 / 2006
Mailing Address 96 Hammond Avenue		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mabel Vasquez		Transaction ID: 30b-21-02496-02496 Date of Disbursement 10 / 27 / 2006
Mailing Address 171 Van Buren Street		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Luis Vasquez		Transaction ID: 30b-21-02497-02497 Date of Disbursement 10 / 27 / 2006
Mailing Address 7-9 3rd Street #5		Amount of Each Disbursement this Period 350.00
City Passaic State NJ Zip Code 07055	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nelsy Vasquez		Transaction ID: 30b-21-02498-02498 Date of Disbursement 10 / 27 / 2006	
Mailing Address 7-9 3rd Street, Apt. 5		Amount of Each Disbursement this Period 350.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andy Vasquez		Transaction ID: 30b-21-02499-02499 Date of Disbursement 10 / 27 / 2006	
Mailing Address 106 Howe Avenue #24		Amount of Each Disbursement this Period 400.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Fatema Abuhamdah		Transaction ID: 30b-21-02500-02500 Date of Disbursement 10 / 27 / 2006	
Mailing Address 142 Caldwell Avenue		Amount of Each Disbursement this Period 350.00	
City Paterson State NJ Zip Code 07510	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Krystle Adams		Transaction ID: 30b-21-02502-02502 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 293 East 18th Street		Amount of Each Disbursement this Period 130.00
City Paterson State NJ Zip Code 07510	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dickson Addai		Transaction ID: 30b-21-02503-02503 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 554 Glenwood Avenue		Amount of Each Disbursement this Period 30.00
City Teaneck State NJ Zip Code 07666	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Austin Ayers		Transaction ID: 30b-21-02505-02505 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 889 Edwards Road		Amount of Each Disbursement this Period 450.00
City Parsippany State NJ Zip Code 07054	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	610.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. John Bishop		Transaction ID: 30b-21-02507-02507 Date of Disbursement 10 / 27 / 2006	
Mailing Address 400 Broadway 4-G		Amount of Each Disbursement this Period 300.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Robert Camalito		Transaction ID: 30b-21-02511-02511 Date of Disbursement 10 / 27 / 2006	
Mailing Address 11 Hickory Road		Amount of Each Disbursement this Period 250.00	
City Pequannock State NJ Zip Code 07440	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Fernando Carrero		Transaction ID: 30b-21-02513-02513 Date of Disbursement 10 / 27 / 2006	
Mailing Address 801 Mount Prospect Street		Amount of Each Disbursement this Period 40.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	590.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ysabel Casilla		Transaction ID: 30b-21-02514-02514 Date of Disbursement 10 / 27 / 2006	
Mailing Address 940 McBride Avenue		Amount of Each Disbursement this Period 250.00	
City West Paterson State NJ Zip Code 07424	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elena Cesario		Transaction ID: 30b-21-02515-02515 Date of Disbursement 10 / 27 / 2006	
Mailing Address 443 B Marshall Street		Amount of Each Disbursement this Period 200.00	
City Paterson State NJ Zip Code 07503	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Susan Cuya		Transaction ID: 30b-21-02517-02517 Date of Disbursement 10 / 27 / 2006	
Mailing Address 324 Harrison Street		Amount of Each Disbursement this Period 120.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	570.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicole Deleasa		Transaction ID: 30b-21-02518-02518 Date of Disbursement 10 / 27 / 2006
Mailing Address 801 North Broad Street Apt. 4B		Amount of Each Disbursement this Period 400.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Karolina Dobasz		Transaction ID: 30b-21-02519-02519 Date of Disbursement 10 / 27 / 2006
Mailing Address 20 East Russel Street Apt. 1		Amount of Each Disbursement this Period 160.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jesse Garcia		Transaction ID: 30b-21-02522-02522 Date of Disbursement 10 / 27 / 2006
Mailing Address 143 East Ninth Street		Amount of Each Disbursement this Period 180.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	740.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Heidi Gonzalez		Transaction ID: 30b-21-02524-02524 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 476 Rutherford Avenue		Amount of Each Disbursement this Period 190.00
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Christina Gordon		Transaction ID: 30b-21-02525-02525 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 63 North 1st Street		Amount of Each Disbursement this Period 80.00
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Vesna Goreska		Transaction ID: 30b-21-02526-02526 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 273 Harding Avenue		Amount of Each Disbursement this Period 300.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	570.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Nikolce Goreski</p>		<p>Transaction ID: 30b-21-02527-02527 Date of Disbursement</p>	
<p>Mailing Address 273 Harding Avenue</p>		<p><input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/></p>	
<p>City Clifton State NJ Zip Code 07011</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Zoran Goreski</p>		<p>Transaction ID: 30b-21-02528-02528 Date of Disbursement</p>	
<p>Mailing Address 14 Lincoln Avenue</p>		<p><input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/></p>	
<p>City Clifton State NJ Zip Code 07011</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Barry Green</p>		<p>Transaction ID: 30b-21-02529-02529 Date of Disbursement</p>	
<p>Mailing Address 730 Elizabeth Avenue</p>		<p><input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/></p>	
<p>City Lyndhurst State NJ Zip Code 07071</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="450.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1050.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melissa Harris		Transaction ID: 30b-21-02532-02532 Date of Disbursement 10 / 27 / 2006	
Mailing Address 7 Heller Place		Amount of Each Disbursement this Period 40.00	
City Maplewood	State NJ	Zip Code 07040	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Tommy Heredia		Transaction ID: 30b-21-02533-02533 Date of Disbursement 10 / 27 / 2006	
Mailing Address 77 1/2 Montclair Avenue		Amount of Each Disbursement this Period 80.00	
City Newark	State NJ	Zip Code 07104	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Joan Ianetti		Transaction ID: 30b-21-02535-02535 Date of Disbursement 10 / 27 / 2006	
Mailing Address 21H Colonia Drive		Amount of Each Disbursement this Period 280.00	
City Jersey City	State NJ	Zip Code 07424	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. William Inzar		Transaction ID: 30b-21-02536-02536 Date of Disbursement 10 / 27 / 2006
Mailing Address 543 Adams Avenue 2nd Floor		Amount of Each Disbursement this Period 80.00
City Elizabeth State NJ Zip Code 07201	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Janice Latorre		Transaction ID: 30b-21-02539-02539 Date of Disbursement 10 / 27 / 2006
Mailing Address 24 East Ninth Street		Amount of Each Disbursement this Period 390.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Angel Manzueta		Transaction ID: 30b-21-02541-02541 Date of Disbursement 10 / 27 / 2006
Mailing Address 67 8th Avenue		Amount of Each Disbursement this Period 40.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	510.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Corey McNeal		Transaction ID: 30b-21-02544-02544 Date of Disbursement 10 / 27 / 2006	
Mailing Address 726 Sixth Avenue		Amount of Each Disbursement this Period 40.00	
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Dalilah Medina		Transaction ID: 30b-21-02545-02545 Date of Disbursement 10 / 27 / 2006	
Mailing Address 144 Cantello Street		Amount of Each Disbursement this Period 120.00	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Micah Moise		Transaction ID: 30b-21-02549-02549 Date of Disbursement 10 / 27 / 2006	
Mailing Address 599 14th Avenue		Amount of Each Disbursement this Period 170.00	
City Paterson State NJ Zip Code 07504	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	330.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Jorge Morel</p>		<p>Transaction ID: 30b-21-02550-02550 Date of Disbursement</p>
<p>Mailing Address 128 East 8th Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Clifton State NJ Zip Code 07011</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="280.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Mohammed Mustafa</p>		<p>Transaction ID: 30b-21-02552-02552 Date of Disbursement</p>
<p>Mailing Address 797 Main Street</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Paterson State NJ Zip Code 07503</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Rania Nakla</p>		<p>Transaction ID: 30b-21-02553-02553 Date of Disbursement</p>
<p>Mailing Address 2554-60 Kennedy Boulevard, Apt. 4-</p>		<p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Jersey City State NJ Zip Code 07097</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="720.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angel Oquendo		Transaction ID: 30b-21-02555-02555 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 177 East Sixth Street		Amount of Each Disbursement this Period 70.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Ortiz Jr		Transaction ID: 30b-21-02557-02557 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 452 Ridge Road		Amount of Each Disbursement this Period 100.00
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Nelson Ortiz Jr.		Transaction ID: 30b-21-02558-02558 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 363 West Clinton Street		Amount of Each Disbursement this Period 280.00
City Haledon State NJ Zip Code 07508	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Romina Pascual		Transaction ID: 30b-21-02560-02560 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 94 Market Street		Amount of Each Disbursement this Period 200.00
City Paterson State NJ Zip Code 07505	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Raisal Peterkin		Transaction ID: 30b-21-02562-02562 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 550 Freeman St		Amount of Each Disbursement this Period 80.00
City Lyndhurst State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Emily Polhamus		Transaction ID: 30b-21-02563-02563 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 12 Franklin Road		Amount of Each Disbursement this Period 200.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Trevor Price		Transaction ID: 30b-21-02564-02564 Date of Disbursement 10 / 27 / 2006
Mailing Address Towers, William Paterson Universit		Amount of Each Disbursement this Period 120.00
City Wayne State NJ Zip Code 07470	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Jonathan Rivera		Transaction ID: 30b-21-02568-02568 Date of Disbursement 10 / 27 / 2006
Mailing Address 34 Brown Avenue		Amount of Each Disbursement this Period 170.00
City Prospect Park State NJ Zip Code 07508	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. George Rodriguez		Transaction ID: 30b-21-02570-02570 Date of Disbursement 10 / 27 / 2006
Mailing Address 111 Rowland Avenue		Amount of Each Disbursement this Period 180.00
City Clifton State NJ Zip Code 07012	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	470.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Tiara Samuel Full Name (Last, First, Middle Initial) Mailing Address 3 Bayberry Drive City Princeton State NJ Zip Code 08540 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02573-02573 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 340.00 Category/Type
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B. Bernel Smith Full Name (Last, First, Middle Initial) Mailing Address 485 East 33rd Street City Paterson State NJ Zip Code 07510 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02576-02576 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
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C. Rodney Soto Full Name (Last, First, Middle Initial) Mailing Address 87-89 Lincoln Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02578-02578 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	460.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kyle Stanton		Transaction ID: 30b-21-02579-02579 Date of Disbursement 10 / 27 / 2006
Mailing Address 42 West Colfax Avenue		Amount of Each Disbursement this Period 170.00
City Roselle Park	State NJ Zip Code 07204	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Tommy Stensgard		Transaction ID: 30b-21-02580-02580 Date of Disbursement 10 / 27 / 2006
Mailing Address 509 3rd Avenue		Amount of Each Disbursement this Period 120.00
City Lyndhurst	State NJ Zip Code 07071	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Shaun Tamayo		Transaction ID: 30b-21-02582-02582 Date of Disbursement 10 / 27 / 2006
Mailing Address 188 Highland Cross		Amount of Each Disbursement this Period 450.00
City Rutherford	State NJ Zip Code 07070	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	740.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mark Tilson		Transaction ID: 30b-21-02585-02585 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 64 Prospect Avenue		Amount of Each Disbursement this Period 340.00
City Hackensack State NJ Zip Code 07602	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Helen Trujillo		Transaction ID: 30b-21-02586-02586 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 221 Wayne Avenue		Amount of Each Disbursement this Period 340.00
City Paterson State NJ Zip Code 07502	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Michelle Tumminelli		Transaction ID: 30b-21-02587-02587 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 178 Highlandcross		Amount of Each Disbursement this Period 420.00
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Barbara Walensky Full Name (Last, First, Middle Initial) Mailing Address 76 DeWitt Street City Garfield State NJ Zip Code 07026 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02591-02591 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 450.00 Category/Type
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B. John Wallace Full Name (Last, First, Middle Initial) Mailing Address 315 Haledon Avenue City Haledon State NJ Zip Code 07508 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02592-02592 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Veronica Yacco Full Name (Last, First, Middle Initial) Mailing Address 12 Hillside Road City Kinnelon State NJ Zip Code 07405 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02594-02594 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stacy Zarate		Transaction ID: 30b-21-02595-02595 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 10 Garretsee Avenue		Amount of Each Disbursement this Period 350.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sharan Zarate		Transaction ID: 30b-21-02596-02596 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 10 Garretsee Avenue		Amount of Each Disbursement this Period 380.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Genevieve Abrams		Transaction ID: 30b-21-02597-02597 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2412 North Pallor		Amount of Each Disbursement this Period 290.00
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1020.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Raymond Boston, Sr		Transaction ID: 30b-21-02604-02604 Date of Disbursement 10 / 27 / 2006
Mailing Address 1735 North 31st Street		Amount of Each Disbursement this Period 360.00
City Philadelphia	State PA Zip Code 19121	
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Ronald Boyette		Transaction ID: 30b-21-02605-02605 Date of Disbursement 10 / 27 / 2006
Mailing Address 708 E. Chestnut Street		Amount of Each Disbursement this Period 360.00
City Coatesville	State PA Zip Code 19320	
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Regina Cooper		Transaction ID: 30b-21-02610-02610 Date of Disbursement 10 / 27 / 2006
Mailing Address 3862 West Frankin		Amount of Each Disbursement this Period 230.00
City Philadelphia	State PA Zip Code 19146	
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jacquesh Cotto		Transaction ID: 30b-21-02611-02611 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 414 E. Chesnut Street		Amount of Each Disbursement this Period 480.00
City Coatesville State PA Zip Code 19320	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gloria Crittenden		Transaction ID: 30b-21-02612-02612 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2820 N. Stillman Street		Amount of Each Disbursement this Period 300.00
City Philadelphia State PA Zip Code 19132	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lorraine Daliessio		Transaction ID: 30b-21-02614-02614 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 843 North Lawrence Street		Amount of Each Disbursement this Period 480.00
City Philadelphia State PA Zip Code 19106	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1260.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Saul Delvalle Full Name (Last, First, Middle Initial) Mailing Address 205 East Monmouth Street City Philadelphia State PA Zip Code 19134 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02616-02616 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 230.00 Category/Type
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B. Gail Gayle Full Name (Last, First, Middle Initial) Mailing Address 3209 West Clifford Street City Philadelphia State PA Zip Code 19121 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02619-02619 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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C. Faith Harrison Full Name (Last, First, Middle Initial) Mailing Address 1233 South 18th Street City Philadelphia State PA Zip Code 19146 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02623-02623 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Hayden		Transaction ID: 30b-21-02624-02624 Date of Disbursement 10 / 27 / 2006
Mailing Address 1413 South 4th Street		Amount of Each Disbursement this Period 210.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jillian Irwin		Transaction ID: 30b-21-02628-02628 Date of Disbursement 10 / 27 / 2006
Mailing Address 5615 Aylesboro Avenue		Amount of Each Disbursement this Period 250.00
City Pittsburgh State PA Zip Code 15217	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Manuel Jose		Transaction ID: 30b-21-02629-02629 Date of Disbursement 10 / 27 / 2006
Mailing Address 1565 Collings Road		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gonzalez Juan		Transaction ID: 30b-21-02631-02631 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2055 East Monmouth Street		Amount of Each Disbursement this Period 230.00
City Philadelphia State PA Zip Code 19134	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ashir Khondker		Transaction ID: 30b-21-02632-02632 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1423 South 4th Street		Amount of Each Disbursement this Period 220.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Theresea Lyles		Transaction ID: 30b-21-02637-02637 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 3119 Clifford Street		Amount of Each Disbursement this Period 360.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	810.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Trevor Polk		Transaction ID: 30b-21-02643-02643 Date of Disbursement 10 / 27 / 2006	
Mailing Address 30 Gylnn Court		Amount of Each Disbursement this Period 210.00	
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jennifer Rice		Transaction ID: 30b-21-02645-02645 Date of Disbursement 10 / 27 / 2006	
Mailing Address 1423 South 4th Street		Amount of Each Disbursement this Period 400.00	
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicole Richardson		Transaction ID: 30b-21-02646-02646 Date of Disbursement 10 / 27 / 2006	
Mailing Address 138 North Yewdall Street		Amount of Each Disbursement this Period 290.00	
City Philadelphia State PA Zip Code 19139	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Bezaleel Rojas		Transaction ID: 30b-21-02649-02649 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 35 South 33rd Street		Amount of Each Disbursement this Period 230.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Latesha Rucker		Transaction ID: 30b-21-02650-02650 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 116 North 51st Street		Amount of Each Disbursement this Period 290.00
City Philadelphia State PA Zip Code 19139	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Roberto Segan		Transaction ID: 30b-21-02651-02651 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 526 Wilder Street		Amount of Each Disbursement this Period 480.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clarence Smith		Transaction ID: 30b-21-02655-02655 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2820 North Stillman Street		Amount of Each Disbursement this Period 300.00
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Quenzellia Smith		Transaction ID: 30b-21-02656-02656 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 3131 West Montgomery Avenue		Amount of Each Disbursement this Period 360.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Octavia Smith		Transaction ID: 30b-21-02657-02657 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 3131 West Montgomery Avenue		Amount of Each Disbursement this Period 360.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1020.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Clinton Thomas Full Name (Last, First, Middle Initial) Mailing Address 3236 West Berk Street City Philadelphia State PA Zip Code 19121 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02659-02659 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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B. Christopher Ward Full Name (Last, First, Middle Initial) Mailing Address 2121 Bancroft Street City Philadelphia State PA Zip Code 19148 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02662-02662 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 220.00 Category/Type
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C. Deborah Wheeler Full Name (Last, First, Middle Initial) Mailing Address 2420 North 32nd Street City Philadelphia State PA Zip Code 19132 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02663-02663 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 230.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Dana Wheeler Full Name (Last, First, Middle Initial) Mailing Address 1420 North 32nd Street City Philadelphia State PA Zip Code 19134 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02664-02664 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 230.00 Category/Type
---	--	---

B. J.Richard Winborne Full Name (Last, First, Middle Initial) Mailing Address 215 South 49th Street City Philadelphia State PA Zip Code 19139 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02665-02665 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 270.00 Category/Type
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C. Matthew Zinader Full Name (Last, First, Middle Initial) Mailing Address 404 Fernwood Avenue City Millville State NJ Zip Code 08332 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02667-02667 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 480.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	980.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Enriquillo Jose		Transaction ID: 30b-21-02671-02671 Date of Disbursement 10 / 27 / 2006
Mailing Address 357 Morse Street		Amount of Each Disbursement this Period 480.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Eric Wachter		Transaction ID: 30b-21-02672-02672 Date of Disbursement 10 / 27 / 2006
Mailing Address 19 East Broad Street Apt B		Amount of Each Disbursement this Period 135.00
City Palmyra State NJ Zip Code 08065	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Roland Goodson		Transaction ID: 30b-21-02673-02673 Date of Disbursement 10 / 27 / 2006
Mailing Address 310 South Harrison Street		Amount of Each Disbursement this Period 150.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	765.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matrix/AEW NB, LLC		Transaction ID: 30b-16-08595-08725																					
Mailing Address CN 4000 Forsgate Drive		Date of Disbursement																					
City Cranbury State NJ Zip Code 08512		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	2	8	/	2	0	0	6														
Purpose of Disbursement Rent		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">5681.67</td> </tr> </table>		5681.67																			
5681.67																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) B. Matrix/AEW NB, LLC		Transaction ID: 30b-16-08595-08726																					
Mailing Address CN 4000 Forsgate Drive		Date of Disbursement																					
City Cranbury State NJ Zip Code 08512		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	2	8	/	2	0	0	6														
Purpose of Disbursement Rent		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">5681.67</td> </tr> </table>		5681.67																			
5681.67																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) C. Frank Orsini		Transaction ID: 30b-16-08596-08727																					
Mailing Address 103 4th Street Apartment #2		Date of Disbursement																					
City Hoboken State NJ Zip Code 07030		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	2	8	/	2	0	0	6														
Purpose of Disbursement Field Consulting Services		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>		3000.00																			
3000.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)	14363.34
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tim Holiday		Transaction ID: 30b-16-08597-0000 Date of Disbursement 10 / 29 / 2006	
Mailing Address 16192 Costal Highway		Amount of Each Disbursement this Period 260.00	
City Lewes State DE Zip Code 19958	Purpose of Disbursement See Memo Items	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. George Dapper Inc.		Transaction ID: 30b-16-08597-08728 Date of Disbursement 10 / 29 / 2006	
Mailing Address 2595 East State Street		Amount of Each Disbursement this Period 260.00	
City Trenton State NJ Zip Code 08619	Purpose of Disbursement Travel Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Gerald Balmir		Transaction ID: 30b-16-08598-0000 Date of Disbursement 10 / 29 / 2006	
Mailing Address 212 Columbia Avenue		Amount of Each Disbursement this Period 260.00	
City Trenton State NJ Zip Code 08618	Purpose of Disbursement See Memo Items	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. George Dapper Inc.		Transaction ID: 30b-16-08598-08729 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 6
Mailing Address 2595 East State Street		Amount of Each Disbursement this Period 260.00 [MEMO ITEM]
City Trenton State NJ Zip Code 08619		
Purpose of Disbursement Travel Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Arpan Dasgupta		Transaction ID: 30b-16-08599-08730 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 6
Mailing Address 510 Grove Ave		Amount of Each Disbursement this Period 337.70
City Highland Park State NJ Zip Code 08904		
Purpose of Disbursement Office Supplies Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael Lang		Transaction ID: 30b-16-08600-08731 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 6
Mailing Address 27 Hawthorne Road		Amount of Each Disbursement this Period 60.20
City Sicklerville State NJ Zip Code 08081		
Purpose of Disbursement Travel Expenses Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	397.90
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Glenn Kraemer		Transaction ID: 30b-16-08601-08732 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 6
Mailing Address 23 Whitman Road		Amount of Each Disbursement this Period 100.00
City State Zip Code Trenton NJ 08619	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. David M Smith		Transaction ID: 30b-16-08602-08733 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 6
Mailing Address 50 New Friendship Road		Amount of Each Disbursement this Period 118.82
City State Zip Code Howell NJ 07731	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Angelique Thompson		Transaction ID: 30b-21-02674-02674 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 6
Mailing Address 10 Dunhill Court		Amount of Each Disbursement this Period 130.00
City State Zip Code Voorhees NJ 08043	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	348.82
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anderson Garcia		Transaction ID: 30b-21-02676-02676 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 6
Mailing Address 98 Welton Street		Amount of Each Disbursement this Period 84.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Elizabeth E. Berry		Transaction ID: 30b-01-03215-05246 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 100 Robbinsville - Allentown Road		Amount of Each Disbursement this Period 1306.61
City Robbinsville State NJ Zip Code 08691	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Daniel C. Dollbaum		Transaction ID: 30b-01-03216-05247 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 6 Butler Place		Amount of Each Disbursement this Period 2260.90
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3651.51
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gerald Balmir		Transaction ID: 30b-01-03217-05248 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 212 Columbia Avenue		Amount of Each Disbursement this Period 2941.60
City Trenton State NJ Zip Code 08618	Category/ Type	
Purpose of Disbursement Salary		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gerald Balmir		Transaction ID: 30b-01-03217-05249 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 212 Columbia Avenue		Amount of Each Disbursement this Period 250.00
City Trenton State NJ Zip Code 08618	Category/ Type	
Purpose of Disbursement Allowance - Insurance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Arleen Barcnas		Transaction ID: 30b-01-03218-05250 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 1281.36
City Paterson State NJ Zip Code 07514	Category/ Type	
Purpose of Disbursement Salary		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4472.96
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Arleen Barcenas		Transaction ID: 30b-01-03218-05251 Date of Disbursement 10 / 30 / 2006	
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 250.00	
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Allowance - Insurance Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard P McGrath		Transaction ID: 30b-01-03220-05253 Date of Disbursement 10 / 30 / 2006	
Mailing Address 100 Hiram Square		Amount of Each Disbursement this Period 3018.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Carmen N. Brown		Transaction ID: 30b-01-03221-05254 Date of Disbursement 10 / 30 / 2006	
Mailing Address 54 Jacob Court		Amount of Each Disbursement this Period 1073.01	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4341.01
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 612 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Campbell		Transaction ID: 30b-01-03222-05255 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 2055 Lawrence Road		Amount of Each Disbursement this Period 966.36
City Lawrenceville State NJ Zip Code 08648		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Diane Legreide		Transaction ID: 30b-01-03223-05256 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 68 Brant Drive		Amount of Each Disbursement this Period 1765.99
City Brick State NJ Zip Code 08724		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Margaret L. Martin		Transaction ID: 30b-01-03224-05257 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 777 West State Street, Apt. 9B		Amount of Each Disbursement this Period 1486.29
City Trenton State NJ Zip Code 08618		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4218.64
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ray Alcantara		Transaction ID: 30b-01-03225-05258 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 52 Wood Lake Drive		Amount of Each Disbursement this Period 1967.51
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Salary		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ray Alcantara		Transaction ID: 30b-01-03225-05259 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 52 Wood Lake Drive		Amount of Each Disbursement this Period 250.00
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Allowance - Insurance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Roberto C Frugone		Transaction ID: 30b-01-03226-05260 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 184 Peer Place		Amount of Each Disbursement this Period 1836.92
City Denville State NJ Zip Code 07834	Category/ Type	
Purpose of Disbursement Salary		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4054.43
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 614 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andre M Richardson		Transaction ID: 30b-01-03227-05261 Date of Disbursement 10 / 30 / 2006
Mailing Address 1755 JFK Boulevard Apartment 1		Amount of Each Disbursement this Period 2484.68
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Andre M Richardson		Transaction ID: 30b-01-03227-05262 Date of Disbursement 10 / 30 / 2006
Mailing Address 1755 JFK Boulevard Apartment 1		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Allowance - Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dale Wolfert		Transaction ID: 30b-01-03228-05263 Date of Disbursement 10 / 30 / 2006
Mailing Address 59 Bosko Drive		Amount of Each Disbursement this Period 1628.97
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4363.65
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Dale Wolfert Full Name (Last, First, Middle Initial) Mailing Address 59 Bosko Drive City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Allowance - Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03228-05264 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
---	--	---

B. Milena T Caraballo Full Name (Last, First, Middle Initial) Mailing Address 627 Highland Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03230-05266 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 780.30 Category/Type
---	--	---

C. Milena T Caraballo Full Name (Last, First, Middle Initial) Mailing Address 627 Highland Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Allowance - Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03230-05267 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1280.30
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ryan Carbain		Transaction ID: 30b-01-03231-05268 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 325 Hudson Drive		Amount of Each Disbursement this Period 966.36
City Brick State NJ Zip Code 08028	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ryan Carbain		Transaction ID: 30b-01-03231-05269 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 325 Hudson Drive		Amount of Each Disbursement this Period 250.00
City Brick State NJ Zip Code 08028	Category/ Type	
Purpose of Disbursement Allowance - Insurance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-01-03232-05270 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 1478.15
City New Milford State NJ Zip Code 07646	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2694.51
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keith C Carbone		Transaction ID: 30b-01-03232-05271 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 250.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. May Chiang		Transaction ID: 30b-01-03234-05274 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 34 West 94th Street Apartment 4B		Amount of Each Disbursement this Period 1030.73
City New York State NY Zip Code 10025	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. May Chiang		Transaction ID: 30b-01-03234-05275 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 34 West 94th Street Apartment 4B		Amount of Each Disbursement this Period 250.00
City New York State NY Zip Code 10025	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1530.73
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Victor Cirilo		Transaction ID: 30b-01-03235-05276 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 1941.87
City West Orange State NJ Zip Code 07052	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Victor Cirilo		Transaction ID: 30b-01-03235-05277 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 250.00
City West Orange State NJ Zip Code 07052	Category/ Type	
Purpose of Disbursement Allowance - Insurance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Laurie K DeMarco		Transaction ID: 30b-01-03236-05278 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 3501 Balmoral Court		Amount of Each Disbursement this Period 987.82
City Freehold State NJ Zip Code 07728	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3179.69
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Laurie K DeMarco		Transaction ID: 30b-01-03236-05279 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 3501 Balmoral Court		Amount of Each Disbursement this Period 250.00
City Freehold State NJ Zip Code 07728	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. John Duthie		Transaction ID: 30b-01-03237-05280 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 100 Robbinsville Allentown Road		Amount of Each Disbursement this Period 2204.85
City Robbinsville State NJ Zip Code 08691	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. John Duthie		Transaction ID: 30b-01-03238-05281 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 100 Robbinsville Allentown Road		Amount of Each Disbursement this Period 250.00
City Robbinsville State NJ Zip Code 08691	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ► 2704.85

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sean P Faughnan		Transaction ID: 30b-01-03239-05282 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 145 Stiles Street Apt 12C		Amount of Each Disbursement this Period 1441.24
City Elizabeth State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Sean P Faughnan		Transaction ID: 30b-01-03239-05283 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 145 Stiles Street Apt 12C		Amount of Each Disbursement this Period 250.00
City Elizabeth State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Allowance - Insurance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Charles Featherson		Transaction ID: 30b-01-03240-05284 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 433 East 31st Street		Amount of Each Disbursement this Period 4558.87
City Paterson State NJ Zip Code 07504	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	6250.11
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Featherson		Transaction ID: 30b-01-03241-05285 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 433 East 31st Street		Amount of Each Disbursement this Period 500.00
City Paterson State NJ Zip Code 07504	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Hans P Goff		Transaction ID: 30b-01-03242-05286 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 5 Cadawalder Drive		Amount of Each Disbursement this Period 1588.89
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Hans P Goff		Transaction ID: 30b-01-03242-05287 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 5 Cadawalder Drive		Amount of Each Disbursement this Period 250.00
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2338.89
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Katherine F Hedden		Transaction ID: 30b-01-03243-05288 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 335 Masterson Court		Amount of Each Disbursement this Period 1682.54
City Ewing State NJ Zip Code 08618	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Katherine F Hedden		Transaction ID: 30b-01-03243-05289 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 335 Masterson Court		Amount of Each Disbursement this Period 250.00
City Ewing State NJ Zip Code 08618	Category/ Type	
Purpose of Disbursement Allowance - Insurance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Adam P Heiser		Transaction ID: 30b-01-03244-05290 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 173 Pompton Avenue		Amount of Each Disbursement this Period 966.36
City Hawthorne State NJ Zip Code 07506	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2898.90
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam P Heiser		Transaction ID: 30b-01-03244-05291 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 173 Pompton Avenue		Amount of Each Disbursement this Period 250.00	
City State Zip Code Hawthorne NJ 07506	Purpose of Disbursement Allowance - Insurance Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Abubakar Jalloh		Transaction ID: 30b-01-03245-05292 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 1441.24	
City State Zip Code Roselle NJ 07203	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Abubakar Jalloh		Transaction ID: 30b-01-03245-05293 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 250.00	
City State Zip Code Roselle NJ 07203	Purpose of Disbursement Allowance - Insurance Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	1941.24
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Peter Joseph		Transaction ID: 30b-01-03246-05294 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 110 Gloucester Drive		Amount of Each Disbursement this Period 1135.94	
City Lawnside State NJ Zip Code 08045	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Peter Joseph		Transaction ID: 30b-01-03246-05295 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 110 Gloucester Drive		Amount of Each Disbursement this Period 250.00	
City Lawnside State NJ Zip Code 08045	Purpose of Disbursement Allowance - Insurance Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ace F. Laluces		Transaction ID: 30b-01-03247-05296 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 1009.27	
City Union State NJ Zip Code 07083	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2395.21
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ace F. Laluces		Transaction ID: 30b-01-03247-05297 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 250.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Michael Lang		Transaction ID: 30b-01-03248-05298 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 27 Hawthorne Road		Amount of Each Disbursement this Period 1135.94
City Sicklerville State NJ Zip Code 08081	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Michael Lang		Transaction ID: 30b-01-03248-05299 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 27 Hawthorne Road		Amount of Each Disbursement this Period 250.00
City Sicklerville State NJ Zip Code 08081	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1635.94
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Pamela Luster Full Name (Last, First, Middle Initial) Mailing Address 2237 Helen Avenue City Vineland State NJ Zip Code 08360 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03249-05300 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 1758.88 Category/Type
--	--	--

B. David M Smith Full Name (Last, First, Middle Initial) Mailing Address 50 New Friendship Road City Howell State NJ Zip Code 07731 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03251-05303 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 1135.94 Category/Type
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C. David M Smith Full Name (Last, First, Middle Initial) Mailing Address 50 New Friendship Road City Howell State NJ Zip Code 07731 Purpose of Disbursement Allowance - Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03251-05304 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	3144.82
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) James Souder		Transaction ID: 30b-01-03252-05305 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 893 Broadway Avenue		Amount of Each Disbursement this Period 2602.98
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) James Souder		Transaction ID: 30b-01-03252-05307 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 893 Broadway Avenue		Amount of Each Disbursement this Period 250.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Allowance - Insurance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ivette Martinez		Transaction ID: 30b-01-03253-05306 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 538 McBride Avenue		Amount of Each Disbursement this Period 1955.31
City West Patterson State NJ Zip Code 07524	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4808.29
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alescia Teel		Transaction ID: 30b-01-03254-05308 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 518 Johnston Avenue		Amount of Each Disbursement this Period 1255.68
City Hamilton State NJ Zip Code 08629		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Alescia Teel		Transaction ID: 30b-01-03255-05309 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 518 Johnston Avenue		Amount of Each Disbursement this Period 250.00
City Hamilton State NJ Zip Code 08629		
Purpose of Disbursement Allowance - Insurance Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Eric Myers		Transaction ID: 30b-01-03256-05310 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 274 Millbridge Avenue		Amount of Each Disbursement this Period 800.92
City Clementon State NJ Zip Code 08021		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2306.60
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Caitlin J VanOrden		Transaction ID: 30b-01-03257-05311 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 1560 Linden Boulevard		Amount of Each Disbursement this Period 987.82
City Vineland State NJ Zip Code 08361	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Caitlin J VanOrden		Transaction ID: 30b-01-03257-05312 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 1560 Linden Boulevard		Amount of Each Disbursement this Period 250.00
City Vineland State NJ Zip Code 08361	Purpose of Disbursement Allowance - Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bryan Walensky		Transaction ID: 30b-01-03258-05313 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 76 Dewitt Street		Amount of Each Disbursement this Period 1628.96
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2866.78
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bryan Walensky		Transaction ID: 30b-01-03258-05314 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 76 Dewitt Street		Amount of Each Disbursement this Period 250.00
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Eric Myers		Transaction ID: 30b-01-03259-05315 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 274 Millbridge Avenue		Amount of Each Disbursement this Period 250.00
City Clementon State NJ Zip Code 08021	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Adam Neary		Transaction ID: 30b-01-03260-05316 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 108 Commons Drive		Amount of Each Disbursement this Period 1893.68
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2393.68
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Neary		Transaction ID: 30b-01-03260-05317 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 108 Commons Drive		Amount of Each Disbursement this Period 250.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Terry West		Transaction ID: 30b-01-03261-05318 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 141 Mercer Street		Amount of Each Disbursement this Period 5493.06
City Trenton State NJ Zip Code 08608	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Terry West		Transaction ID: 30b-01-03262-05319 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 141 Mercer Street		Amount of Each Disbursement this Period 250.00
City Trenton State NJ Zip Code 08608	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5993.06
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Nicole Nestopoulous</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1306 Hannock Drive #2</p> <p>City Barrington State NJ Zip Code 08007</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-01-03263-05320</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2499.40"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>B. Charles W Williams</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 80 High Street</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-01-03264-05321</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1681.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>C. Charles W Williams</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 80 High Street</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Allowance - Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-01-03264-05322</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4430.40"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicole Nestopoulous		Transaction ID: 30b-01-03265-05323 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 1306 Hannock Drive #2		Amount of Each Disbursement this Period 250.00
City Barrington State NJ Zip Code 08007	Purpose of Disbursement Allowance - Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ryan Yacco		Transaction ID: 30b-01-03266-05324 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 218 Easton Avenue		Amount of Each Disbursement this Period 966.36
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Ryan Yacco		Transaction ID: 30b-01-03266-05325 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 218 Easton Avenue		Amount of Each Disbursement this Period 250.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Allowance - Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1466.36
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Summer Oesch		Transaction ID: 30b-01-03267-05326 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 515 1/2 Evergreen Avenue		Amount of Each Disbursement this Period 2793.89
City State Zip Code Bradley Beach NJ 07720	Category/ Type	
Purpose of Disbursement Salary		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Summer Oesch		Transaction ID: 30b-01-03267-05327 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 515 1/2 Evergreen Avenue		Amount of Each Disbursement this Period 250.00
City State Zip Code Bradley Beach NJ 07720	Category/ Type	
Purpose of Disbursement Allowance - Insurance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Omar Perez		Transaction ID: 30b-01-03268-05328 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 148 Mercer Street		Amount of Each Disbursement this Period 727.34
City State Zip Code Jersey City NJ 07302	Category/ Type	
Purpose of Disbursement Salary		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3771.23
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Omar Perez		Transaction ID: 30b-01-03268-05329 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 148 Mercer Street		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Frank Schultz		Transaction ID: 30b-01-03269-05330 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 12 McKinley Avenue		Amount of Each Disbursement this Period 966.37
City Blackwood State NJ Zip Code 08012	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Frank Schultz		Transaction ID: 30b-01-03269-05335 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 12 McKinley Avenue		Amount of Each Disbursement this Period 250.00
City Blackwood State NJ Zip Code 08012	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1466.37
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Zaida E Polanco		Transaction ID: 30b-01-03270-05331 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 1327.34
City Passaic State NJ Zip Code 07055	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Zaida E Polanco		Transaction ID: 30b-01-03270-05332 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 250.00
City Passaic State NJ Zip Code 07055	Category/ Type	
Purpose of Disbursement Allowance - Insurance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael D Reed		Transaction ID: 30b-01-03271-05333 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 109 Spring Street		Amount of Each Disbursement this Period 1216.80
City Trenton State NJ Zip Code 08618	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2794.14
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael D Reed Full Name (Last, First, Middle Initial) Mailing Address 109 Spring Street City Trenton State NJ Zip Code 08618 Purpose of Disbursement Allowance - Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03271-05334 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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B. Alfredo Rivera Full Name (Last, First, Middle Initial) Mailing Address PO Box 40034 City Newark State NJ Zip Code 07104 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03272-05336 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 1441.24 Category/Type
--	--	--

C. Alfredo Rivera Full Name (Last, First, Middle Initial) Mailing Address PO Box 40034 City Newark State NJ Zip Code 07104 Purpose of Disbursement Allowance - Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03272-05337 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1941.24
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Safanya Searcy		Transaction ID: 30b-01-03273-05338 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 272 17th Avenue		Amount of Each Disbursement this Period 1281.16
City Newark State NJ Zip Code 07103	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Safanya Searcy		Transaction ID: 30b-01-03273-05339 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 272 17th Avenue		Amount of Each Disbursement this Period 250.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Allowance - Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Joseph Shields		Transaction ID: 30b-01-03274-05340 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 700 Lower State Road Apt. 904		Amount of Each Disbursement this Period 4629.46
City North Wales State PA Zip Code 19454	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6160.62
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph Shields		Transaction ID: 30b-01-03275-05341 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 700 Lower State Road Apt. 904		Amount of Each Disbursement this Period 250.00
City North Wales State PA Zip Code 19454	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-01-03276-05342 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 1592.05
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-01-03276-05343 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 250.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Allowance - Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2092.05
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jim Sinclair		Transaction ID: 30b-01-03277-05344 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 106 Oak Pines Boulevard		Amount of Each Disbursement this Period 3362.53
City Pemberton State NJ Zip Code 08608	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. United States Federal Government		Transaction ID: 30b-01-03278-05345 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 39042.06
City Washington State DC Zip Code 20001	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. State of New Jersey		Transaction ID: 30b-01-03279-05346 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address Department of Treasury		Amount of Each Disbursement this Period 6828.46
City Trenton State NJ Zip Code 08608	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	49233.05
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicholas H Fixmer		Transaction ID: 30b-01-03280-05347 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 1750.00
City State Zip Code Scotch Plains NJ 07076	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Samuel Reisen		Transaction ID: 30b-01-03281-05348 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 615 Prospect Street		Amount of Each Disbursement this Period 750.00
City State Zip Code Maplewood NJ 07040	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jon Evans		Transaction ID: 30b-01-03282-05349 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 1 Ithanel Road		Amount of Each Disbursement this Period 750.00
City State Zip Code Hoptcong NJ 07843	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3250.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin John Cutro		Transaction ID: 30b-01-03283-05350 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 741 Oak Avenue		Amount of Each Disbursement this Period 750.00
City Westfield State NJ Zip Code 07090	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Niel D Stender		Transaction ID: 30b-01-03284-05351 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 154 Herbert Avenue		Amount of Each Disbursement this Period 750.00
City Fanwood State NJ Zip Code 07023	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. IBN Seafood Cafe'		Transaction ID: 30b-16-08604-08735 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 77 Lincoln Place		Amount of Each Disbursement this Period 875.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Food & Beverage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2375.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Regena L. Thomas		Transaction ID: 30b-16-08606-08737 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 42 Versailles Court		Amount of Each Disbursement this Period 15000.00
City Hamilton State NJ Zip Code 08619		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SVM, LP		Transaction ID: 30b-16-08607-08738 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 999 East Touhy Avenue Suite 250		Amount of Each Disbursement this Period 787.45
City Des Plaines State IL Zip Code 60018		
Purpose of Disbursement Travel Expenses	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dollar Rent-A-Car		Transaction ID: 30b-16-08608-08739 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 100 Ridgedale Avenue		Amount of Each Disbursement this Period 2642.30
City Morristown State NJ Zip Code 07960		
Purpose of Disbursement Travel Expenses	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	18429.75
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08700-08833 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 10.00
City Trenton State NJ Zip Code 08608	Purpose of Disbursement Service Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. ADP Payroll Services		Transaction ID: 30b-01-03402-05517 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 157.02
City Fort Washington State NJ Zip Code 19034	Purpose of Disbursement Payroll Processing Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. ADP Payroll Services		Transaction ID: 30b-01-03403-05518 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 148.44
City Fort Washington State NJ Zip Code 19034	Purpose of Disbursement Payroll Processing Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	315.46
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08694-08827
Mailing Address 150 West State Street		Date of Disbursement 10 / 31 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 30.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Just Four Wheels		Transaction ID: 30b-16-08609-08740
Mailing Address DBA: JFW Franklin Park 3231A Route 27		Date of Disbursement 10 / 31 / 2006
City Franklin Park	State NJ	Zip Code 08823
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 36503.37
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Branford Press, Inc.		Transaction ID: 30b-16-08610-08741
Mailing Address 21 William Street		Date of Disbursement 10 / 31 / 2006
City Newark	State NJ	Zip Code 07102
Purpose of Disbursement Printing Services		Amount of Each Disbursement this Period 4740.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	41273.37
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08695-08828
Mailing Address 150 West State Street		Date of Disbursement 10 / 31 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 30.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: 30b-16-08696-08829
Mailing Address 150 West State Street		Date of Disbursement 10 / 31 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 30.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 30b-16-08697-08830
Mailing Address 150 West State Street		Date of Disbursement 10 / 31 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 10.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	70.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08698-08831
Mailing Address 150 West State Street		Date of Disbursement 10 / 31 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 10.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: 30b-16-08705-08838
Mailing Address 150 West State Street		Date of Disbursement 10 / 31 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 5.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 30b-16-08707-08840
Mailing Address 150 West State Street		Date of Disbursement 10 / 31 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge		Amount of Each Disbursement this Period 5.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	20.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08708-08841 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 1302.00
City State Zip Code Trenton NJ 08608	Purpose of Disbursement Service Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Clarke American		Transaction ID: 30b-21-05065-05065 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 10575 Vista Park Road		Amount of Each Disbursement this Period 525.18
City State Zip Code Dallas TX 75238	Purpose of Disbursement Banking Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 30b-16-08711-08844 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 10.00
City State Zip Code Trenton NJ 08608	Purpose of Disbursement Service Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1837.18
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Just Four Wheels, Inc.		Transaction ID: 30b-22-00007-00007 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 324 East White Horse Pike		Amount of Each Disbursement this Period 864.65
City Galloway State NJ Zip Code 08205	Category/ Type	
Purpose of Disbursement Travel Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CSI		Transaction ID: 30b-22-00008-00008 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 2101 South Main Street		Amount of Each Disbursement this Period 20625.00
City Little Rock State AK Zip Code 72206	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Clarion Hotel and Convention Center		Transaction ID: 30b-22-00009-00009 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 6821 Black Horse Pike		Amount of Each Disbursement this Period 2412.70
City Atlantic City West State NJ Zip Code 08234	Category/ Type	
Purpose of Disbursement Site Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	23902.35
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Newman's Mill Road Subs & Pizza		Transaction ID: 30b-22-00010-00010 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 6415 Mill Road		Amount of Each Disbursement this Period 4000.00
City Egg Harbor Townshi State NJ Zip Code 08234	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mario's Famous Pizzeria		Transaction ID: 30b-22-00011-00011 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 175 Third Street		Amount of Each Disbursement this Period 3900.00
City Elizabeth State NJ Zip Code 07206	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. SVM, LP		Transaction ID: 30b-22-00012-00012 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 999 East Touhy Avenue Suite 250		Amount of Each Disbursement this Period 2914.28
City Des Plaines State IL Zip Code 60018	Category/ Type	
Purpose of Disbursement Travel Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10814.28
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tuzzio's Italian Cuisine		Transaction ID: 30b-22-00013-00013 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 224 Westwood Avenue		Amount of Each Disbursement this Period 1640.00
City Long Branch State NJ Zip Code 07740	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JR's Grill & Pizza		Transaction ID: 30b-22-00014-00014 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 148 Smith Street		Amount of Each Disbursement this Period 1070.00
City Perth Amboy State NJ Zip Code 08861	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael V's Catering		Transaction ID: 30b-22-00015-00015 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 201 Washington Avenue		Amount of Each Disbursement this Period 1900.00
City Belleville State NJ Zip Code 07109	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4610.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Enterprise Rent-a-Car		Transaction ID: 30b-22-00016-00016 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 750 Walnut Avenue		Amount of Each Disbursement this Period 5332.50
City Cranford State NJ Zip Code 07016	Category/ Type	
Purpose of Disbursement Travel Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LaVita's Pizza		Transaction ID: 30b-22-00017-00017 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 400 JFK Way		Amount of Each Disbursement this Period 1200.00
City Willingboro State NJ Zip Code 08046	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dunkin Donuts		Transaction ID: 30b-22-00018-00018 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 263 White Horse Pike		Amount of Each Disbursement this Period 344.15
City Lawnside State NJ Zip Code 08045	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6876.65
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 653 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Just Four Wheels, Inc.		Transaction ID: 30b-22-00019-00019 Date of Disbursement 11 / 01 / 2006
Mailing Address 324 East White Horse Pike		Amount of Each Disbursement this Period 2109.34
City Galloway State NJ Zip Code 08205	Category/ Type	
Purpose of Disbursement Travel Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Aunt Berta's Kitchen		Transaction ID: 30b-22-00021-00021 Date of Disbursement 11 / 01 / 2006
Mailing Address 639 White Horse Pike		Amount of Each Disbursement this Period 550.00
City Oaklyn State NJ Zip Code 08107	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Aunt Berta's Kitchen		Transaction ID: 30b-22-00022-00022 Date of Disbursement 11 / 01 / 2006
Mailing Address 639 White Horse Pike		Amount of Each Disbursement this Period 550.00
City Oaklyn State NJ Zip Code 08107	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3209.34
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Quality Lincoln, Mercury, Hyundai		Transaction ID: 30b-22-00024-00024 Date of Disbursement 11 / 01 / 2006
Mailing Address P.O. Box 789		Amount of Each Disbursement this Period 424.50
City Millville State NJ Zip Code 08332	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Big Brother's Sandwich and Deli		Transaction ID: 30b-22-00025-00025 Date of Disbursement 11 / 01 / 2006
Mailing Address 415 Martin Luther King Drive		Amount of Each Disbursement this Period 525.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Enterprise Rent-a-Car		Transaction ID: 30b-22-00026-00026 Date of Disbursement 11 / 01 / 2006
Mailing Address 750 Walnut Avenue		Amount of Each Disbursement this Period 600.00
City Cranford State NJ Zip Code 07016	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1549.50
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cookie's Tots and Toddlers		Transaction ID: 30b-22-00027-00027
Mailing Address 109 Virginia Avenue		Date of Disbursement MM / DD / YYYY 11 / 01 / 2006
City Trenton	State NJ	Zip Code 08611
Purpose of Disbursement Food & Beverage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 1500.00	

Full Name (Last, First, Middle Initial) B. Stout's Bus Service, Inc.		Transaction ID: 30b-22-00029-00029
Mailing Address 20 Ieren Street		Date of Disbursement MM / DD / YYYY 11 / 01 / 2006
City Trenton	State NJ	Zip Code 08638
Purpose of Disbursement Travel Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 300.00	

Full Name (Last, First, Middle Initial) C. Stout's Bus Service, Inc.		Transaction ID: 30b-22-00030-00030
Mailing Address 20 Ieren Street		Date of Disbursement MM / DD / YYYY 11 / 01 / 2006
City Trenton	State NJ	Zip Code 08638
Purpose of Disbursement Travel Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 300.00	

SUBTOTAL of Disbursements This Page (optional)	2100.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stout's Bus Service, Inc.		Transaction ID: 30b-22-00031-00031 Date of Disbursement 11 / 01 / 2006	
Mailing Address 20 Ieren Street		Amount of Each Disbursement this Period 1200.00	
City Trenton	State NJ	Zip Code 08638	Category/ Type
Purpose of Disbursement Travel Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Stout's Bus Service, Inc.		Transaction ID: 30b-22-00032-00032 Date of Disbursement 11 / 01 / 2006	
Mailing Address 20 Ieren Street		Amount of Each Disbursement this Period 300.00	
City Trenton	State NJ	Zip Code 08638	Category/ Type
Purpose of Disbursement Travel Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Stout's Bus Service, Inc.		Transaction ID: 30b-22-00033-00033 Date of Disbursement 11 / 01 / 2006	
Mailing Address 20 Ieren Street		Amount of Each Disbursement this Period 300.00	
City Trenton	State NJ	Zip Code 08638	Category/ Type
Purpose of Disbursement Travel Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1800.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. East Main Grocery		Transaction ID: 30b-22-00034-00034 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 42 East Main Street		Amount of Each Disbursement this Period 305.00
City Paterson State NJ Zip Code 07552	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. On The Job Sports Cafe'		Transaction ID: 30b-22-00035-00035 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 325 Grand Street		Amount of Each Disbursement this Period 636.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PSE&G		Transaction ID: 30b-22-00036-00036 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address P.O.Box 14106		Amount of Each Disbursement this Period 284.43
City New Brunswick State NJ Zip Code 08906-4106	Purpose of Disbursement Utilities	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1225.43
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Verizon</p> <p>Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address P.O. Box 4833</p> <p>City Trenton State NJ Zip Code 08650</p> <p>Purpose of Disbursement Telecommunications Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-22-00037-00037</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1114.67"/></p>
<p>Purpose of Disbursement Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Pines Manor</p> <p>Full Name (Last, First, Middle Initial) Pines Manor</p> <p>Mailing Address 2085 Route 27</p> <p>City Edison State NJ Zip Code 08817</p> <p>Purpose of Disbursement Site Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-22-00038-00038</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>Purpose of Disbursement Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Subway</p> <p>Full Name (Last, First, Middle Initial) Subway</p> <p>Mailing Address 354 George Street</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-22-00039-00039</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2300.00"/></p>
<p>Purpose of Disbursement Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3914.67"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Suburban Trails, Inc.		Transaction ID: 30b-22-00040-00040 Date of Disbursement MM / DD / YYYY 11 / 01 / 2006
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 2750.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Travel Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Coach USA		Transaction ID: 30b-22-00041-00041 Date of Disbursement MM / DD / YYYY 11 / 01 / 2006
Mailing Address 160 South Route 17 North		Amount of Each Disbursement this Period 6255.00
City Paramus State NJ Zip Code 07652	Purpose of Disbursement Travel Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Party Box		Transaction ID: 30b-22-00042-00042 Date of Disbursement MM / DD / YYYY 11 / 01 / 2006
Mailing Address 240 Route 17 South		Amount of Each Disbursement this Period 14980.00
City Lodi State NJ Zip Code 07644	Purpose of Disbursement GOTV Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	23985.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Campbell		Transaction ID: 30b-01-03307-05385 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 2055 Lawrence Road		Amount of Each Disbursement this Period 87.36
City Lawrenceville State NJ Zip Code 08648	Category/ Type	
Purpose of Disbursement Travel Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Message & Media		Transaction ID: 30b-16-08613-08744 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 100 Albany Street		Amount of Each Disbursement this Period 5000.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Political Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gabriel Rodriguez		Transaction ID: 30b-16-08614-08745 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 95 B Phelps Avenue		Amount of Each Disbursement this Period 1500.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Political Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6587.36
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Field Strategies Full Name (Last, First, Middle Initial) Mailing Address 2120 L Street NW - Suite 305 City Washington State DC Zip Code 20037 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08615-08746 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6 Amount of Each Disbursement this Period 6000.00 Category/Type
--	--	--

B. Street Level Services, LLC Full Name (Last, First, Middle Initial) Mailing Address 16192 Coastal Highway City Lewes State DE Zip Code 19958 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08616-08747 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6 Amount of Each Disbursement this Period 1750.00 Category/Type
--	--	--

C. David Parano Full Name (Last, First, Middle Initial) Mailing Address 702 Maywood Avenue City Maywood State NJ Zip Code 07607 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08617-08748 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6 Amount of Each Disbursement this Period 3000.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	10750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brendan Gill		Transaction ID: 30b-16-08618-08749 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 5000.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mark Meyers		Transaction ID: 30b-16-08619-08750 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 38 West 7th Street		Amount of Each Disbursement this Period 2000.00
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dominick Pandolfo		Transaction ID: 30b-16-08620-08751 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 164 Grand Street, Apt. 1		Amount of Each Disbursement this Period 1250.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8250.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. James Madden		Transaction ID: 30b-16-08621-08754 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 366 Sussex Road		Amount of Each Disbursement this Period 1500.00
City Wood-Ridge State NJ Zip Code 07075	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Angelina Montanez		Transaction ID: 30b-16-08623-08756 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 4105 Moss Mill Road		Amount of Each Disbursement this Period 1000.00
City Hammonton State NJ Zip Code 08037	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Luz Vasquez		Transaction ID: 30b-16-08624-08757 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 9 South State Street		Amount of Each Disbursement this Period 1000.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jamil Howard		Transaction ID: 30b-22-00043-00043 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 322 East State Street		Amount of Each Disbursement this Period 2300.00
City State Zip Code Trenton NJ 08608	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Just Four Wheels, Inc.		Transaction ID: 30b-22-00048-00048 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 324 East White Horse Pike		Amount of Each Disbursement this Period 114.96
City State Zip Code Galloway NJ 08205	Purpose of Disbursement Travel Expenses	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Avis Rent-A-Car		Transaction ID: 30b-22-00049-00049 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 1300 Highway 34		Amount of Each Disbursement this Period 364.26
City State Zip Code Matawan NJ 07747	Purpose of Disbursement Travel Expenses	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ► **2779.22**

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dreamz Corporation		Transaction ID: 30b-22-00050-00050 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 570 Main Avenue		Amount of Each Disbursement this Period 2000.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jose Rodriguez		Transaction ID: 30b-22-00051-00051 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 34 Bloomfield Avenue		Amount of Each Disbursement this Period 300.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Equipment Rental	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. James Souder		Transaction ID: 30b-22-00052-00053 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 893 Broadway Avenue		Amount of Each Disbursement this Period 101.56
City Newark State NJ Zip Code 07104	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2401.56
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Erin Caragher		Transaction ID: 30b-22-00053-00054 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 250 West Milton Avenue		Amount of Each Disbursement this Period 75.49
City State Zip Code Rahway NJ 07065	Purpose of Disbursement Office Supplies	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. May Chiang		Transaction ID: 30b-22-00054-00055 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 34 West 94th Street Apartment 4B		Amount of Each Disbursement this Period 126.57
City State Zip Code New York NY 10025	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. May Chiang		Transaction ID: 30b-22-00054-00056 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 34 West 94th Street Apartment 4B		Amount of Each Disbursement this Period 5.12
City State Zip Code New York NY 10025	Purpose of Disbursement Office Supplies	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ► 207.18

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gerald Balmir		Transaction ID: 30b-22-00055-0000 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 212 Columbia Avenue		Amount of Each Disbursement this Period 500.76
City State Zip Code Trenton NJ 08618	Purpose of Disbursement See Memo Items	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marriott - Lafayette Yard		Transaction ID: 30b-22-00055-00057 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 1 West Lafayette Street		Amount of Each Disbursement this Period 500.76
City State Zip Code Trenton NJ 08608	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Vincent Aviles		Transaction ID: 30b-22-00057-00059 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 545 North 5th Street		Amount of Each Disbursement this Period 1200.00
City State Zip Code Newark NJ 07104	Purpose of Disbursement Equipment Rental	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1700.76
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clarke American		Transaction ID: 30b-22-00200-00223 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 10575 Vista Park Road		Amount of Each Disbursement this Period 123.00
City Dallas State TX Zip Code 75238	Purpose of Disbursement Banking Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Clarke American		Transaction ID: 30b-22-00201-00224 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 10575 Vista Park Road		Amount of Each Disbursement this Period 53.00
City Dallas State TX Zip Code 75238	Purpose of Disbursement Banking Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. ADP Payroll Services		Transaction ID: 30b-01-03423-05538 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 174.22
City Fort Washington State NJ Zip Code 19034	Purpose of Disbursement Payroll Processing Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	350.22
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 30b-16-08712-08845
Mailing Address 150 West State Street		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Service Charge	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 10.00	

Full Name (Last, First, Middle Initial) B. RISC Inc.		Transaction ID: 30b-22-00058-00060
Mailing Address DBA AA Discount 55 Riverview Avenue		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006
City Edison	State NJ	Zip Code 08817
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 1956.00	

Full Name (Last, First, Middle Initial) C. Enterprise Rent-A-Car		Transaction ID: 30b-22-00059-00061
Mailing Address 2625 Highway 70		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006
City Manasquan	State NJ	Zip Code 08736
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 298.50	

SUBTOTAL of Disbursements This Page (optional)	2264.50
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Catering By Troy's/Troy's Place		Transaction ID: 30b-22-00060-00062 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 4919 Westfield Avenue		Amount of Each Disbursement this Period 642.00
City State Zip Code Pennsauken NJ 08110	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Catering By Troy's/Troy's Place		Transaction ID: 30b-22-00061-00063 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 4919 Westfield Avenue		Amount of Each Disbursement this Period 1348.00
City State Zip Code Pennsauken NJ 08110	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ruth's Caterers		Transaction ID: 30b-22-00062-00064 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1468 Bellview Avenue		Amount of Each Disbursement this Period 1500.00
City State Zip Code Camden NJ 08103	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3490.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shalom Baptist Church		Transaction ID: 30b-22-00067-00069 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1036 Broadway		Amount of Each Disbursement this Period 500.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Perry Jenkins		Transaction ID: 30b-22-00068-00070 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1468 Bellview Avenue		Amount of Each Disbursement this Period 1200.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Entertainment Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00071 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Travel Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2395.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00072 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Travel Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00073 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 2085.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Travel Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00074 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Travel Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3475.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00075 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Travel Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00076 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 2085.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Travel Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00077 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Travel Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3475.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00078	
Mailing Address 750 Somerset Street		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City New Brunswick	State NJ	Zip Code 08901	Amount of Each Disbursement this Period 795.00
Purpose of Disbursement Travel Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00079	
Mailing Address 750 Somerset Street		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City New Brunswick	State NJ	Zip Code 08901	Amount of Each Disbursement this Period 795.00
Purpose of Disbursement Travel Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00080	
Mailing Address 750 Somerset Street		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City New Brunswick	State NJ	Zip Code 08901	Amount of Each Disbursement this Period 2790.00
Purpose of Disbursement Travel Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	4380.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00081 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Travel Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00082 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Travel Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00083 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Travel Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2085.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00084 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 695.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Travel Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Coach USA - Suburban Transit		Transaction ID: 30b-22-00069-00085 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 750 Somerset Street		Amount of Each Disbursement this Period 1095.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Travel Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Mercer County Central Labor Council		Transaction ID: 30b-22-00070-00086 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2 Iron Ore Road - Route 33		Amount of Each Disbursement this Period 1050.00
City Englishtown State NJ Zip Code 07726	Category/ Type	
Purpose of Disbursement Site Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2840.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. RWDSU Local 108		Transaction ID: 30b-22-00073-00089 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1576 Springfield Avenue		Amount of Each Disbursement this Period 135.00
City State Zip Code Maplewood NJ 07040	Category/ Type	
Purpose of Disbursement Site Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. UNITE HERE Local 99		Transaction ID: 30b-22-00075-00091 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 810 31st Street		Amount of Each Disbursement this Period 215.00
City State Zip Code Union City NJ 07087	Category/ Type	
Purpose of Disbursement Site Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Painters Union		Transaction ID: 30b-22-00078-00094 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 9-B Fadem Road		Amount of Each Disbursement this Period 65.00
City State Zip Code Springfield NJ 07081	Category/ Type	
Purpose of Disbursement Site Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	415.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Emmanuel Baptist Church		Transaction ID: 30b-22-00080-00096 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address Higgins Drive		Amount of Each Disbursement this Period 450.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Frank's Lunch Truck		Transaction ID: 30b-22-00081-00097 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 119 Wayne Avenue		Amount of Each Disbursement this Period 1000.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Quality Lincoln, Mercury, Hyundai		Transaction ID: 30b-22-00082-00098 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address P.O. Box 789		Amount of Each Disbursement this Period 181.76
City Millville State NJ Zip Code 08332	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1631.76
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. George Dapper Inc.		Transaction ID: 30b-22-00083-00099 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2595 East State Street		Amount of Each Disbursement this Period 260.00
City Trenton State NJ Zip Code 08619		
Purpose of Disbursement Travel Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car		Transaction ID: 30b-22-00084-00100 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3011 Admiral Wilson Boulevard		Amount of Each Disbursement this Period 3099.48
City Pennsauken State NJ Zip Code 08109		
Purpose of Disbursement Travel Expenses	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Enterprise Rent-A-Car		Transaction ID: 30b-22-00085-00101 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3011 Admiral Wilson Boulevard		Amount of Each Disbursement this Period 551.52
City Pennsauken State NJ Zip Code 08109		
Purpose of Disbursement Travel Expenses	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3911.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. William's Grocery		Transaction ID: 30b-22-00086-00102
Mailing Address 644 North 9th Street		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006
City Camden	State NJ	Amount of Each Disbursement this Period 375.00
Zip Code 08102		
Purpose of Disbursement Food & Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Napoli Restaurant & Pizza		Transaction ID: 30b-22-00087-00103
Mailing Address 99 Montgomery Street		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006
City Bloomfield	State NJ	Amount of Each Disbursement this Period 513.60
Zip Code 07003		
Purpose of Disbursement Food & Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Noble Lester		Transaction ID: 30b-21-02678-02678
Mailing Address 21 Euclid Avenue		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006
City Hackensack	State NJ	Amount of Each Disbursement this Period 150.00
Zip Code 07601		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1038.60
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Robert Robinson		Transaction ID: 30b-21-02679-02679 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1714 Clinton Place		Amount of Each Disbursement this Period 150.00
City Teaneck State NJ Zip Code 07066	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mildred Seward		Transaction ID: 30b-21-02681-02681 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 135 East Lawn Drive		Amount of Each Disbursement this Period 150.00
City Teaneck State NJ Zip Code 07666	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Brice Balden		Transaction ID: 30b-21-02683-02683 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 133 Wilson Street		Amount of Each Disbursement this Period 240.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Riza Barotec		Transaction ID: 30b-21-02685-02685 Date of Disbursement 11 / 03 / 2006	
Mailing Address 678 Carlyle Place		Amount of Each Disbursement this Period 150.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Marciel Bastista		Transaction ID: 30b-21-02686-02686 Date of Disbursement 11 / 03 / 2006	
Mailing Address 120 Sussex Street Apartment 180		Amount of Each Disbursement this Period 190.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Russell Bravo		Transaction ID: 30b-21-02688-02688 Date of Disbursement 11 / 03 / 2006	
Mailing Address 655 Palisade Road		Amount of Each Disbursement this Period 150.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	490.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Priscilla Caicedo Full Name (Last, First, Middle Initial) Mailing Address 710 Bergen Avenue City Fair Lawn State NJ Zip Code 07410 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02689-02689 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 150.00 Category/Type
--	--	---

B. Angye Chima Full Name (Last, First, Middle Initial) Mailing Address 26 Pulaski Place City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02690-02690 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Rocio Cobbs Full Name (Last, First, Middle Initial) Mailing Address 377 W Pleasantview Avenue, Apt 207 City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02691-02691 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 348.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	738.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Cochiarella		Transaction ID: 30b-21-02692-02692 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 892 Hopson Street Apt 2		Amount of Each Disbursement this Period 200.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Triff Col		Transaction ID: 30b-21-02693-02693 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1620 Edmund Terrace		Amount of Each Disbursement this Period 150.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael Defelice		Transaction ID: 30b-21-02694-02694 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 20 Maiden Road		Amount of Each Disbursement this Period 240.00
City Little Ferry State NJ Zip Code 07643	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	590.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Enrico Domingo		Transaction ID: 30b-21-02695-02695 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2139 Van Buren Place		Amount of Each Disbursement this Period 600.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Eugene Fernandez		Transaction ID: 30b-21-02696-02696 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 18 Park Avenue		Amount of Each Disbursement this Period 40.00
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Esperanza Flores		Transaction ID: 30b-21-02698-02698 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 26 Pulaski Place		Amount of Each Disbursement this Period 348.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	988.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Man Han		Transaction ID: 30b-21-02699-02699 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 17 Glen Street		Amount of Each Disbursement this Period 150.00
City Cliffsid park State NJ Zip Code 07010	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Vlad Katsva		Transaction ID: 30b-21-02702-02702 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1-41 37th Street		Amount of Each Disbursement this Period 348.00
City Fair Lawn State NJ Zip Code 07410	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Teodor Kostadinov		Transaction ID: 30b-21-02703-02703 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 28 Christina Street		Amount of Each Disbursement this Period 240.00
City Little Ferry State NJ Zip Code 07643	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	738.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shannon Leahy		Transaction ID: 30b-21-02704-02704 Date of Disbursement 11 / 03 / 2006	
Mailing Address 41 Hewlett Drive		Amount of Each Disbursement this Period 50.00	
City Wayne State NJ Zip Code 07082	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Brian Louvado		Transaction ID: 30b-21-02705-02705 Date of Disbursement 11 / 03 / 2006	
Mailing Address 122 Tappan Street		Amount of Each Disbursement this Period 60.00	
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kevin Lowry		Transaction ID: 30b-21-02706-02706 Date of Disbursement 11 / 03 / 2006	
Mailing Address 8-64 Henderson Boulevard		Amount of Each Disbursement this Period 500.00	
City Fair Lawn State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	610.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shelly Mack		Transaction ID: 30b-21-02707-02707 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 22 Leving Street		Amount of Each Disbursement this Period 50.00	
City South Hackensack State NJ Zip Code 07606	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Daniel Mastrangelo		Transaction ID: 30b-21-02709-02709 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 459 Primrose Avenue		Amount of Each Disbursement this Period 500.00	
City Oradell State NJ Zip Code 07649	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Francisco Melendez		Transaction ID: 30b-21-02710-02710 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 2101 Briarwood Lane		Amount of Each Disbursement this Period 190.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	740.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Duban Moreno Full Name (Last, First, Middle Initial) Mailing Address 469 Jackson Avenue City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02711-02711 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 290.00 Category/Type
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B. Adam Moursy Full Name (Last, First, Middle Initial) Mailing Address 187 Sylvan Street City Rutherford State NJ Zip Code 07070 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02712-02712 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. Veronica Otalvaro Full Name (Last, First, Middle Initial) Mailing Address 240 Prospect Avenue City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02713-02713 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 290.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	780.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 690 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Renato Pagaduan		Transaction ID: 30b-21-02714-02714 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2431 North 3rd Street		Amount of Each Disbursement this Period 150.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Tarence Pauldon		Transaction ID: 30b-21-02715-02715 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 159 Liberty Road		Amount of Each Disbursement this Period 50.00
City Englewood State NJ Zip Code 07631	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ruth Perez		Transaction ID: 30b-21-02716-02716 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 85 South State Street		Amount of Each Disbursement this Period 240.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	440.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Purn		Transaction ID: 30b-21-02718-02718 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 7 Marts Lane		Amount of Each Disbursement this Period 290.00	
City Pine Brook State NJ Zip Code 07058	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jayson Reyes		Transaction ID: 30b-21-02720-02720 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 2520 Leslie Street		Amount of Each Disbursement this Period 200.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Cesar Rojas		Transaction ID: 30b-21-02721-02721 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 574 Olympia Avenue 2nd Floor		Amount of Each Disbursement this Period 50.00	
City Cliffside Park State NJ Zip Code 07010	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vanessa Rosario		Transaction ID: 30b-21-02722-02722 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 4 Marion Street		Amount of Each Disbursement this Period 100.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Tatiana Ruiz		Transaction ID: 30b-21-02723-02723 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1 Marion Street Apt 2		Amount of Each Disbursement this Period 240.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Christine Smith		Transaction ID: 30b-21-02724-02724 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 100 River Road Apt 32		Amount of Each Disbursement this Period 200.00
City Bogota State NJ Zip Code 07603	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rossana Stella		Transaction ID: 30b-21-02725-02725 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 242 Donaldson Avenue		Amount of Each Disbursement this Period 290.00	
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Aldrin Talaway		Transaction ID: 30b-21-02727-02727 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 794 Colonial Arms Road		Amount of Each Disbursement this Period 100.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Daniel Valenti		Transaction ID: 30b-21-02728-02728 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 8 Baker Street		Amount of Each Disbursement this Period 190.00	
City Iselin State NJ Zip Code 08830	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	580.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Eduardo Whitt Full Name (Last, First, Middle Initial) Mailing Address 2523 Standish Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02729-02729 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 250.00 Category/Type
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B. Christine Winter Full Name (Last, First, Middle Initial) Mailing Address 165 Howard Avenue City Rochelle Park State NJ Zip Code 07662 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02730-02730 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 415.00 Category/Type
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C. Britney Wyatt Full Name (Last, First, Middle Initial) Mailing Address 387 Creasant Drive City Franklin Lakes State NJ Zip Code 07417 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02731-02731 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 140.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	805.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Thelma Allen Full Name (Last, First, Middle Initial) Mailing Address 11 Tillman Place City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02732-02732 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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B. Nathaniel Anderson Full Name (Last, First, Middle Initial) Mailing Address 39 Country Club City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02733-02733 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Walter Howard Jr. Full Name (Last, First, Middle Initial) Mailing Address 6 Indian Lane City Burlington State NJ Zip Code 08016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02734-02734 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	380.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Elsie Albone		Transaction ID: 30b-21-02735-02735 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 880 Kearsley Road		Amount of Each Disbursement this Period 50.00
City Sicklerville State NJ Zip Code 08081	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kevin Badie		Transaction ID: 30b-21-02736-02736 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 520 Colligs Avenue		Amount of Each Disbursement this Period 50.00
City Collingswood State NJ Zip Code 08108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Patricia Bowen		Transaction ID: 30b-21-02737-02737 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 13 Brandywine Road		Amount of Each Disbursement this Period 50.00
City Laurel Springs State NJ Zip Code 08021	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lakesha Brown		Transaction ID: 30b-21-02738-02738 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address C-13 Sycamore Court South		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Cristina DeLeon		Transaction ID: 30b-21-02741-02741 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 100.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Connie DeLeon		Transaction ID: 30b-21-02742-02742 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 100.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kristen DiVenti		Transaction ID: 30b-21-02743-02743 Date of Disbursement 11 / 03 / 2006	
Mailing Address 33 Natur Lane		Amount of Each Disbursement this Period 150.00	
City Sewell	State NJ	Zip Code 08080	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:		

Full Name (Last, First, Middle Initial) B. Paul Fox		Transaction ID: 30b-21-02744-02744 Date of Disbursement 11 / 03 / 2006	
Mailing Address 100 Spruce Street		Amount of Each Disbursement this Period 100.00	
City Audubon	State NJ	Zip Code 08106	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:		

Full Name (Last, First, Middle Initial) C. Marc Garcia		Transaction ID: 30b-21-02745-02745 Date of Disbursement 11 / 03 / 2006	
Mailing Address 311 North Elmwood Road		Amount of Each Disbursement this Period 150.00	
City Marlton	State NJ	Zip Code 08053	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:		

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. David Keller Full Name (Last, First, Middle Initial) Mailing Address 1 Hoot Owl Drive City Sicklerville State NJ Zip Code 08081 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02746-02746 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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B. Timothy Kravitz Full Name (Last, First, Middle Initial) Mailing Address 500 Columbia Avenue City Pitman State NJ Zip Code 08071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02747-02747 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Kenatra Lee Full Name (Last, First, Middle Initial) Mailing Address 1496 Louis Street City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02748-02748 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Eric Low Full Name (Last, First, Middle Initial) Mailing Address 328 West Graisbury City Audubon State NJ Zip Code 08106 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02749-02749 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 200.00 Category/Type
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B. Tamara G. Marsh Full Name (Last, First, Middle Initial) Mailing Address 3623 Fremont Avenue City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02751-02751 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Monique Parker Full Name (Last, First, Middle Initial) Mailing Address 411 East Gibbsboro Road, Apartment City Lindenwold State NJ Zip Code 08021 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02753-02753 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tim Pearson		Transaction ID: 30b-21-02754-02754 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 1 Lexington Way		Amount of Each Disbursement this Period 100.00	
City Erial State NJ Zip Code 08081	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jaideep Sen		Transaction ID: 30b-21-02755-02755 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 63 Bunning Drive		Amount of Each Disbursement this Period 100.00	
City Voorhees State NJ Zip Code 08043	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Zinnia Sharpe		Transaction ID: 30b-21-02756-02756 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 535 MacKinet Way		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 702 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Malcolm Inman		Transaction ID: 30b-21-03263-03263 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 49 East 18th		Amount of Each Disbursement this Period 50.00
City Bayonne State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Maria Javier		Transaction ID: 30b-21-03264-03264 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 205 Monticello Avenue		Amount of Each Disbursement this Period 90.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Yvette Manning		Transaction ID: 30b-21-03265-03265 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 34 Bleeker Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	190.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 703 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roosevelt McKinnie		Transaction ID: 30b-21-03267-03267 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 149 Claremont Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Fuquan Mutalib		Transaction ID: 30b-21-03268-03268 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 7 Center Way		Amount of Each Disbursement this Period 230.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Deborah Norwood		Transaction ID: 30b-21-03269-03269 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 305.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	585.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jeanette Nunez Full Name (Last, First, Middle Initial) Mailing Address 190 VanNostrand Street City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03270-03270 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 50.00 Category/Type
--	--	--

B. Nicolas Ortiz Full Name (Last, First, Middle Initial) Mailing Address 619 Grove Street City Jersey City State NJ Zip Code 07310 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03271-03271 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 50.00 Category/Type
---	--	--

C. Walter Payton Full Name (Last, First, Middle Initial) Mailing Address 391 Forrest Street City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03272-03272 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. James Perez Full Name (Last, First, Middle Initial) Mailing Address 230 Pine Street City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03273-03273 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
--	--	--

B. Frederick Phelps Full Name (Last, First, Middle Initial) Mailing Address 153 Myrtle Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03274-03274 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 30.00 Category/Type
---	--	--

C. Jacklyn Richardson Full Name (Last, First, Middle Initial) Mailing Address 346 Princeton Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03275-03275 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	130.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 706 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kenneth Rowe		Transaction ID: 30b-21-03276-03276 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 61 North Arlington Avenue		Amount of Each Disbursement this Period 120.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. R Wali Sloan		Transaction ID: 30b-21-03277-03277 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 5 Whitney Place Apt 22		Amount of Each Disbursement this Period 120.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Markee Smith		Transaction ID: 30b-21-03278-03278 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 112 Bostwick Avenue		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	440.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 707 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eugene Streeter		Transaction ID: 30b-21-03279-03279 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 143 Fulton Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Yasheida Taylor		Transaction ID: 30b-21-03280-03280 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 754 Communipaw Avenue		Amount of Each Disbursement this Period 110.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nyeisha Thompson		Transaction ID: 30b-21-03281-03281 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 240 Clerk Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07304	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 708 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dawn Thornton		Transaction ID: 30b-21-03282-03282 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1 Waterview Drive		Amount of Each Disbursement this Period 190.00
City Lakewood State NJ Zip Code 08701	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lativia Waldron		Transaction ID: 30b-21-03284-03284 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 112 Bostwick Ave		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hakim Williams		Transaction ID: 30b-21-03285-03285 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 80 High Street		Amount of Each Disbursement this Period 250.00
City West Orange State NJ Zip Code 07052	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 709 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Halima Williams</p>		<p>Transaction ID: 30b-21-03286-03286 Date of Disbursement</p>
<p>Mailing Address 211 Orange Road</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City State Zip Code Montclair NJ 07042</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Janice Williams</p>		<p>Transaction ID: 30b-21-03287-03287 Date of Disbursement</p>
<p>Mailing Address 80 High Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City State Zip Code East Orange NJ 07017</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="350.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Linda Williams</p>		<p>Transaction ID: 30b-21-03288-03288 Date of Disbursement</p>
<p>Mailing Address 22 Belmont Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p>
<p>City State Zip Code Jersey City NJ 07304</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="650.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 710 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brendan Cassidy		Transaction ID: 30b-21-03289-03289 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 122 Huntington Street		Amount of Each Disbursement this Period 180.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Kevin Fortkiewicz		Transaction ID: 30b-21-03290-03290 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 16 Clover Lane		Amount of Each Disbursement this Period 270.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Dalandra Epting		Transaction ID: 30b-21-03291-03291 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 25 Joyce Kimer Avenue, Apt. 2, P.O.		Amount of Each Disbursement this Period 275.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	725.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cecile Aponte		Transaction ID: 30b-21-03292-03292 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 220 Kearney Street		Amount of Each Disbursement this Period 320.00	
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Darryl Perkins		Transaction ID: 30b-21-03293-03293 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 101 N-4th Street.		Amount of Each Disbursement this Period 90.00	
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Barry Smith		Transaction ID: 30b-21-03294-03294 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 6-2 Christina Place		Amount of Each Disbursement this Period 90.00	
City Paterson State NJ Zip Code 07502	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Hassan Smith Full Name (Last, First, Middle Initial) Mailing Address 4-8 Colonial Ave City Paterson State NJ Zip Code 07502 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03295-03295 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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B. Lawrence Smith Full Name (Last, First, Middle Initial) Mailing Address 48 Colonial Avenue City Paterson State NJ Zip Code 07502 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03296-03296 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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C. Hassan Abdul-Rasheed Full Name (Last, First, Middle Initial) Mailing Address 259 Reynolds Terrace City Orange State NJ Zip Code 07050 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02759-02759 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dawn Asberry		Transaction ID: 30b-21-02761-02761 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 284 Leslie Street		Amount of Each Disbursement this Period 150.00
City Newark State NJ Zip Code 07112		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kieth Barham		Transaction ID: 30b-21-02762-02762 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 308 Academy Street		Amount of Each Disbursement this Period 490.00
City South Orange State NJ Zip Code 07079		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dalandra Barton		Transaction ID: 30b-21-02763-02763 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 275 Prospect Street, Apt#4C		Amount of Each Disbursement this Period 150.00
City East Orange State NJ Zip Code		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	790.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ebony Barton		Transaction ID: 30b-21-02764-02764 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 275 Prospect Street Apt 4C		Amount of Each Disbursement this Period 150.00
City East Orange State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Philip Baskerville		Transaction ID: 30b-21-02765-02765 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 33 Netherwood Place		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Michelle Bethel		Transaction ID: 30b-21-02767-02767 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 65 N. Munn Avenue		Amount of Each Disbursement this Period 170.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	420.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Frances Bowen		Transaction ID: 30b-21-02768-02768 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 67 Columbia Avenue		Amount of Each Disbursement this Period 300.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. LaCreashia Boyd		Transaction ID: 30b-21-02769-02769 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 308 South 10th Street		Amount of Each Disbursement this Period 300.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Kevin Brown		Transaction ID: 30b-21-02770-02770 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 281 South Burnett Street		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Desirea Carr Full Name (Last, First, Middle Initial) Mailing Address 43 East Park Street Apt 23 City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02772-02772 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Brsean Cline Full Name (Last, First, Middle Initial) Mailing Address 165 Avon Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02775-02775 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Theresa Combs Full Name (Last, First, Middle Initial) Mailing Address 164 South Harrison Street City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02778-02778 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 550.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sparkle Conover		Transaction ID: 30b-21-02779-02779 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 100.00
City East Orange	State NJ	
Zip Code 07017		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Vincent Conover		Transaction ID: 30b-21-02780-02780 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 43 East Park Street		Amount of Each Disbursement this Period 100.00
City East Orange	State NJ	
Zip Code 07017		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Jeran Crawford		Transaction ID: 30b-21-02782-02782 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 268 Clinton Place		Amount of Each Disbursement this Period 20.00
City Newark	State NJ	
Zip Code 07112		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Marietta Davis Full Name (Last, First, Middle Initial) Mailing Address 299 South 9th Street City Newark State NJ Zip Code 07107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02783-02783 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 90.00 Category/Type
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B. Gilmar Dinas Full Name (Last, First, Middle Initial) Mailing Address 407 37th Street City Union City State NJ Zip Code 07087 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02784-02784 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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C. Shaeed Epps Full Name (Last, First, Middle Initial) Mailing Address 187 A Pershine Avenue City Newark State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02787-02787 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 450.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1030.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Craig Euston Full Name (Last, First, Middle Initial) Mailing Address 68 Eppirit Street City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02788-02788 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Sara Ferreiro Full Name (Last, First, Middle Initial) Mailing Address 5206 Bergenline Avenue City West New York State NJ Zip Code 07093 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02789-02789 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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C. Francisco Ferreiro Full Name (Last, First, Middle Initial) Mailing Address 126 Paulison Avenue City Ridgefield Park State NJ Zip Code 07660 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02790-02790 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1080.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michelle Franklin Full Name (Last, First, Middle Initial) Mailing Address 243 North Oraton Parkway City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02791-02791 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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B. Thursten Green Full Name (Last, First, Middle Initial) Mailing Address 68 Beech Street City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02792-02792 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Lash Green Full Name (Last, First, Middle Initial) Mailing Address 1348 Gray Mill Drive City Scotch Plains State NJ Zip Code 07076 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02793-02793 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 500.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Doris Hickson		Transaction ID: 30b-21-02797-02797 Date of Disbursement 11 / 03 / 2006	
Mailing Address 177 Quitman Street		Amount of Each Disbursement this Period 300.00	
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Minnie House		Transaction ID: 30b-21-02799-02799 Date of Disbursement 11 / 03 / 2006	
Mailing Address 100 Second Street, Apt #107		Amount of Each Disbursement this Period 300.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lonnie Hughes		Transaction ID: 30b-21-02800-02800 Date of Disbursement 11 / 03 / 2006	
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 500.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Barry Jackson		Transaction ID: 30b-21-02801-02801 Date of Disbursement 11 / 03 / 2006	
Mailing Address 60 Bedford Terrace		Amount of Each Disbursement this Period 400.00	
City Irvington	State NJ	Zip Code 07111	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Malik James		Transaction ID: 30b-21-02802-02802 Date of Disbursement 11 / 03 / 2006	
Mailing Address 20 Schulyer Avenue 3rd Floor		Amount of Each Disbursement this Period 500.00	
City Newark	State NJ	Zip Code 07112	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Rufus Johnson		Transaction ID: 30b-21-02804-02804 Date of Disbursement 11 / 03 / 2006	
Mailing Address 125 Montrose Avenue		Amount of Each Disbursement this Period 420.00	
City Newark	State NJ	Zip Code 07106	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1320.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Linda King Full Name (Last, First, Middle Initial) Mailing Address 97 Willowdale Avenue City Montclair State NJ Zip Code 07042 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02806-02806 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Shante Kirkland Full Name (Last, First, Middle Initial) Mailing Address 528 Grove Street, Apt #1 City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02808-02808 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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C. Annette Lampkin Full Name (Last, First, Middle Initial) Mailing Address 276 Lehigh Avenue City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02809-02809 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 30.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	430.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gabriel Leonard		Transaction ID: 30b-21-02810-02810 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 87 Augusta Street		Amount of Each Disbursement this Period 450.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Tanisha Manning		Transaction ID: 30b-21-02811-02811 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 139 Mt. Vernon Place		Amount of Each Disbursement this Period 300.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Shana Manning		Transaction ID: 30b-21-02812-02812 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 138 Mount Vernon Place Apt 1		Amount of Each Disbursement this Period 360.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1110.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jacob McGhee		Transaction ID: 30b-21-02814-02814 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 124 Hamilton Street		Amount of Each Disbursement this Period 350.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Keith McKenzie		Transaction ID: 30b-21-02815-02815 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 61 Georgia King Village		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07107		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Chante Mettaux		Transaction ID: 30b-21-02816-02816 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 593 South 19th Street		Amount of Each Disbursement this Period 500.00
City Newark State NJ Zip Code 07103		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Quan Miller Full Name (Last, First, Middle Initial) Mailing Address 259 Reynolds Terrace, Apt#B7 City Orange State NJ Zip Code 07050 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02817-02817 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Sean Moyer Full Name (Last, First, Middle Initial) Mailing Address 452 Walker Street City Fairview State NJ Zip Code 07022 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02820-02820 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 490.00 Category/Type
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C. Gerald Murphy Full Name (Last, First, Middle Initial) Mailing Address 130 Shephard Avenue City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02821-02821 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	690.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Evelyn O'Neal Full Name (Last, First, Middle Initial) Mailing Address 311 Littleton Avenue City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02822-02822 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 450.00 Category/Type
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B. Carmen Perez Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 771 City Harrison State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02825-02825 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 140.00 Category/Type
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C. Mike Piscatelli Full Name (Last, First, Middle Initial) Mailing Address 108 Grace Street City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02826-02826 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 490.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1080.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Elizabeth Powell Full Name (Last, First, Middle Initial) Elizabeth Powell		Transaction ID: 30b-21-02827-02827 Date of Disbursement 11 / 03 / 2006
Mailing Address 125 Weequahic Avenue		Amount of Each Disbursement this Period 180.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Dorothea Powell Full Name (Last, First, Middle Initial) Dorothea Powell		Transaction ID: 30b-21-02828-02828 Date of Disbursement 11 / 03 / 2006
Mailing Address 125 Weequahic Avenue		Amount of Each Disbursement this Period 420.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Alice Randle Full Name (Last, First, Middle Initial) Alice Randle		Transaction ID: 30b-21-02829-02829 Date of Disbursement 11 / 03 / 2006
Mailing Address 65-B Irvine Turner Boulevard		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Karina Robredo		Transaction ID: 30b-21-02832-02832 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 20 Cleveland Avenue		Amount of Each Disbursement this Period 540.00
City Harrison State NJ Zip Code 07029	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Dante Rollins		Transaction ID: 30b-21-02833-02833 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lawana Rollins		Transaction ID: 30b-21-02834-02834 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	740.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Rollins		Transaction ID: 30b-21-02835-02835 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 150.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jermaine Sanders		Transaction ID: 30b-21-02836-02836 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 14 Treadwell Street		Amount of Each Disbursement this Period 300.00
City Newark State NJ Zip Code 07104		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Tamel Saunders		Transaction ID: 30b-21-02837-02837 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 15 Isabelle Avenue 2nd Floor		Amount of Each Disbursement this Period 350.00
City Newark State NJ Zip Code 07016		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Theresa Scott		Transaction ID: 30b-21-02838-02838 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 138 Mt. Veron Place		Amount of Each Disbursement this Period 120.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Diane Scott		Transaction ID: 30b-21-02839-02839 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 35 12th Avenue Apt #3503		Amount of Each Disbursement this Period 150.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lisa Scott		Transaction ID: 30b-21-02840-02840 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 780.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Charmaine Smith Full Name (Last, First, Middle Initial) Mailing Address 299 South 9th Street City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02841-02841 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
--	--	---

B. Quadira Smith Full Name (Last, First, Middle Initial) Mailing Address 57 Marth Street City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02842-02842 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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C. Terrance Taylor Full Name (Last, First, Middle Initial) Mailing Address 2544 Audrey Terrace City Union City State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02846-02846 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 560.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1210.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lorenzo Thompson Full Name (Last, First, Middle Initial) Mailing Address 488 Jelliff Avenue City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02847-02847 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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B. Terry Tucker Full Name (Last, First, Middle Initial) Mailing Address 3001 South Grove Street City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02849-02849 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. John Williams Full Name (Last, First, Middle Initial) Mailing Address 11 Lincoln Park Apt 31 City Newark State NJ Zip Code 07102 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02851-02851 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	460.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Blanca Zapata		Transaction ID: 30b-21-02852-02852 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 358 Montgomery Street		Amount of Each Disbursement this Period 300.00	
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Louis Antenor		Transaction ID: 30b-21-02853-02853 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 46 Lorelei Road		Amount of Each Disbursement this Period 70.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Henry De Koninck		Transaction ID: 30b-21-02855-02855 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 625.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	995.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Robert DePaul Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-02856-02856 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3 Brook End Drive		Amount of Each Disbursement this Period 50.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Christopher Echeverria Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-02857-02857 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 11 Webber Road		Amount of Each Disbursement this Period 100.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Syieda Ellison Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-02858-02858 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 573 Morris Street		Amount of Each Disbursement this Period 50.00
City Orange State NJ Zip Code 07050		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Larissa Folk		Transaction ID: 30b-21-02859-02859 Date of Disbursement 11 / 03 / 2006	
Mailing Address PO Box 1067		Amount of Each Disbursement this Period 50.00	
City Maplewood	State NJ	Zip Code 07040	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jayson Harpster		Transaction ID: 30b-21-02862-02862 Date of Disbursement 11 / 03 / 2006	
Mailing Address 400 South Orange Avenue		Amount of Each Disbursement this Period 150.00	
City South Orange	State NJ	Zip Code 07079	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Donald Kraszewski		Transaction ID: 30b-21-02863-02863 Date of Disbursement 11 / 03 / 2006	
Mailing Address 7 Jefferson Street		Amount of Each Disbursement this Period 150.00	
City Belleville	State NJ	Zip Code 07109	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tramaine Marwino		Transaction ID: 30b-21-02864-02864 Date of Disbursement 11 / 03 / 2006
Mailing Address 53 Elm Street		Amount of Each Disbursement this Period 30.00
City West Orange	State NJ	
Zip Code 07052	Category/Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Michael McLaughlin		Transaction ID: 30b-21-02865-02865 Date of Disbursement 11 / 03 / 2006
Mailing Address 400 South Orange Avenue		Amount of Each Disbursement this Period 150.00
City South Orange	State NJ	
Zip Code 07079	Category/Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Timothy O'donnell		Transaction ID: 30b-21-02866-02866 Date of Disbursement 11 / 03 / 2006
Mailing Address 400 South Orange Avenue		Amount of Each Disbursement this Period 50.00
City South Orange	State NJ	
Zip Code 07079	Category/Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	230.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rick Pierre-Philipp		Transaction ID: 30b-21-02867-02867 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 152 South Valley Road		Amount of Each Disbursement this Period 50.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Theo Pollack		Transaction ID: 30b-21-02868-02868 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 500.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nicole Rodriguez		Transaction ID: 30b-21-02869-02869 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 351.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	901.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jenna Scheps		Transaction ID: 30b-21-02870-02870 Date of Disbursement 11 / 03 / 2006	
Mailing Address 9 Valley Way		Amount of Each Disbursement this Period 500.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Briana Sellers		Transaction ID: 30b-21-02871-02871 Date of Disbursement 11 / 03 / 2006	
Mailing Address 300 Main Street Apt 11		Amount of Each Disbursement this Period 220.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Glen Sellers		Transaction ID: 30b-21-02872-02872 Date of Disbursement 11 / 03 / 2006	
Mailing Address 42 Elm Street		Amount of Each Disbursement this Period 50.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ryan Tice		Transaction ID: 30b-21-02875-02875 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 151 Prospect Avenue, Apartment 6F		Amount of Each Disbursement this Period 500.00
City Hackensack State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Natalie Agboyibar		Transaction ID: 30b-21-02876-02876 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 64 Tensaw Drive		Amount of Each Disbursement this Period 50.00
City Browns Mills State NJ Zip Code 08015	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jessica Alecknavage		Transaction ID: 30b-21-02877-02877 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 167 Peregrine Drive		Amount of Each Disbursement this Period 100.00
City Voorhees State NJ Zip Code 08043	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Myra Arroyo		Transaction ID: 30b-21-02878-02878 Date of Disbursement 11 / 03 / 2006	
Mailing Address 1711 Heather Place		Amount of Each Disbursement this Period 250.00	
City Clementon State NJ Zip Code 08021	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Karen Badie		Transaction ID: 30b-21-02880-02880 Date of Disbursement 11 / 03 / 2006	
Mailing Address 520 Collings Avenue Apartment 403B		Amount of Each Disbursement this Period 200.00	
City Collingswood State NJ Zip Code 08017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joshua Bateman		Transaction ID: 30b-21-02881-02881 Date of Disbursement 11 / 03 / 2006	
Mailing Address 412 Broadway Avenue		Amount of Each Disbursement this Period 250.00	
City Westville State NJ Zip Code 08093	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Cherell Briggs Full Name (Last, First, Middle Initial) Mailing Address 101 S Walter Avenue City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02882-02882 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
---	--	--

B. Michael Canary Full Name (Last, First, Middle Initial) Mailing Address 28 Walnut Street City Beachwood State NJ Zip Code 08722 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02883-02883 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. Jennifer Cummings Full Name (Last, First, Middle Initial) Mailing Address 67 Hancock Avenue Apartment 2 City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02884-02884 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kerri Daley		Transaction ID: 30b-21-02885-02885 Date of Disbursement 11 / 03 / 2006	
Mailing Address 20 Beloit Avenue		Amount of Each Disbursement this Period 100.00	
City Audubon	State NJ	Zip Code 08106	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Judith Dutton		Transaction ID: 30b-21-02886-02886 Date of Disbursement 11 / 03 / 2006	
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 150.00	
City Franklinville	State NJ	Zip Code 08322	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Danielle Garcia		Transaction ID: 30b-21-02888-02888 Date of Disbursement 11 / 03 / 2006	
Mailing Address 1141 Sheridan Avenue		Amount of Each Disbursement this Period 200.00	
City Bellmawr	State NJ	Zip Code 08031	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tarr Harris		Transaction ID: 30b-21-02889-02889 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 200 Mullica Hill Road		Amount of Each Disbursement this Period 350.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Brian Kratky		Transaction ID: 30b-21-02891-02891 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1268 Robinson Terrace		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. John Laska		Transaction ID: 30b-21-02892-02892 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 262 Buchanan Avenue		Amount of Each Disbursement this Period 50.00
City Bellmawr State NJ Zip Code 08031	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tashell Martin		Transaction ID: 30b-21-02896-02896 Date of Disbursement 11 / 03 / 2006
Mailing Address 8 Exton Lane		Amount of Each Disbursement this Period 50.00
City Willingboro	State NJ Zip Code 08046	
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Dru Mealing		Transaction ID: 30b-21-02897-02897 Date of Disbursement 11 / 03 / 2006
Mailing Address 485 Cary Street		Amount of Each Disbursement this Period 200.00
City Orange	State NJ Zip Code 07050	
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kaisha Mercado		Transaction ID: 30b-21-02898-02898 Date of Disbursement 11 / 03 / 2006
Mailing Address 812 Tulip Street		Amount of Each Disbursement this Period 100.00
City Camden	State NJ Zip Code 08104	
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tammy Mitchell		Transaction ID: 30b-21-02899-02899 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 11 Greendale Road		Amount of Each Disbursement this Period 100.00
City Newton State NJ Zip Code 07860	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Montan		Transaction ID: 30b-21-02900-02900 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 49 Howell Place		Amount of Each Disbursement this Period 50.00
City Kearny State NJ Zip Code 07032	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paul Olszewski		Transaction ID: 30b-21-02901-02901 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 321 Huntington Avenue		Amount of Each Disbursement this Period 200.00
City Glendora State NJ Zip Code 08029	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maraud Pemberton		Transaction ID: 30b-21-02902-02902 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 26 Joseph Drive		Amount of Each Disbursement this Period 200.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Javier Arroyo		Transaction ID: 30b-21-02906-02906 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 100 Montgomery Street Apartment 15		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jessica Brodie		Transaction ID: 30b-21-02907-02907 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 36 Highland Avenue		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Erick Camacho		Transaction ID: 30b-21-02908-02908 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 24C		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Monica Compre		Transaction ID: 30b-21-02909-02909 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 9 Fleet Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Ada Fuentes		Transaction ID: 30b-21-02910-02910 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 111 Prospect Street, Apartment 1L		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Samantha Hernandez		Transaction ID: 30b-21-02911-02911 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 319 Fairmount Avenue Apt. 1		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Julio Justiniano		Transaction ID: 30b-21-02913-02913 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 146 Madison Street		Amount of Each Disbursement this Period 250.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. David Laboy		Transaction ID: 30b-21-02914-02914 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 11H		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vanessa Normand		Transaction ID: 30b-21-02915-02915 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Joseph Pagan		Transaction ID: 30b-21-02916-02916 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 162 Third Street Apt 86		Amount of Each Disbursement this Period 140.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Marco Perez		Transaction ID: 30b-21-02917-02917 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 221 Parsonage Hill Road		Amount of Each Disbursement this Period 350.00
City Short Hills State NJ Zip Code 07078	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Robert Perry Full Name (Last, First, Middle Initial) Mailing Address 65 West 29th Street City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02918-02918 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Gilberto Rogalski Full Name (Last, First, Middle Initial) Mailing Address 166 Grand Street City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02919-02919 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Peter Rosario Full Name (Last, First, Middle Initial) Mailing Address 17 Gracie Road City East Hanover State NJ Zip Code 07936 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02920-02920 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Frank Schmetz		Transaction ID: 30b-21-02921-02921 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 146 Carlton Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gianina Valdivieso		Transaction ID: 30b-21-02922-02922 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 379 Manila Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jake Yant		Transaction ID: 30b-21-02923-02923 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 123 Ferry Street		Amount of Each Disbursement this Period 150.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bruce Baker		Transaction ID: 30b-21-02924-02924 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 130 Broad Avenue		Amount of Each Disbursement this Period 45.00	
City Trenton	State NJ	Zip Code 08618	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Sharon Godett		Transaction ID: 30b-21-02926-02926 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address PO Box 322		Amount of Each Disbursement this Period 45.00	
City Trenton	State NJ	Zip Code 08603	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Joanne Hicks		Transaction ID: 30b-21-02927-02927 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 6-1 Fairway Drive		Amount of Each Disbursement this Period 45.00	
City Trenton	State NJ	Zip Code 08618	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	135.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mattie Horton		Transaction ID: 30b-21-02928-02928 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 70 North Clinton Avenue Apt 84 A		Amount of Each Disbursement this Period 45.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kevin Hugh		Transaction ID: 30b-21-02929-02929 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 9 Stretton Circle		Amount of Each Disbursement this Period 25.00
City State Zip Code Willingboro NJ 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Shari Kerr		Transaction ID: 30b-21-02930-02930 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 20 Linden Avenue		Amount of Each Disbursement this Period 45.00
City State Zip Code Montclair NJ 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	115.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Chastity Manning		Transaction ID: 30b-21-02931-02931 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 802 Hoffman Avenue		Amount of Each Disbursement this Period 45.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rena Maske		Transaction ID: 30b-21-02932-02932 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 455 Hamilton Avenue, # 5		Amount of Each Disbursement this Period 45.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Letitia Queen		Transaction ID: 30b-21-02933-02933 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 364 Walnut Avenue		Amount of Each Disbursement this Period 45.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	135.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ishmael Raines		Transaction ID: 30b-21-02934-02934 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 362 Oakland Street		Amount of Each Disbursement this Period 85.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jan Stokes		Transaction ID: 30b-21-02935-02935 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 27 North Clinton Avenue, Apt 209		Amount of Each Disbursement this Period 65.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Medina Wilson		Transaction ID: 30b-21-02936-02936 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2-2 Fairway Drive		Amount of Each Disbursement this Period 45.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sarah Gutschow		Transaction ID: 30b-21-02939-02939 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 56 Titus Avenue		Amount of Each Disbursement this Period 50.00	
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Brendan Kelly		Transaction ID: 30b-21-02940-02940 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 123 Fleming Way		Amount of Each Disbursement this Period 480.00	
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Glenn Kraemer		Transaction ID: 30b-21-02941-02941 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 23 Whitman Road		Amount of Each Disbursement this Period 480.00	
City Trenton State NJ Zip Code 08619	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	1010.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jose Abreu		Transaction ID: 30b-21-02942-02942 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 450 Division, 2nd Floor		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Alexandra Acosta		Transaction ID: 30b-21-02943-02943 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3604 Derwood Lane #204		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22309	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Alexandra Acosta		Transaction ID: 30b-21-02944-02944 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3604 Derwood Lane #204		Amount of Each Disbursement this Period 500.00
City Alexandria State VA Zip Code 22309	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ► 1550.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Edwin Ayala		Transaction ID: 30b-21-02945-02945 Date of Disbursement 11 / 03 / 2006	
Mailing Address 5 Dino Drive		Amount of Each Disbursement this Period 50.00	
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Marbey Barcenas		Transaction ID: 30b-21-02946-02946 Date of Disbursement 11 / 03 / 2006	
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 560.00	
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jose Batista		Transaction ID: 30b-21-02947-02947 Date of Disbursement 11 / 03 / 2006	
Mailing Address 650 Katherine Avenue		Amount of Each Disbursement this Period 50.00	
City Perth Amboy State NJ Zip Code 08865	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	660.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 760 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Reynaldo Caltitla Full Name (Last, First, Middle Initial) Mailing Address 345 Townsend Street 2nd Floor City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02948-02948 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Jesus Castillo Full Name (Last, First, Middle Initial) Mailing Address 61 Kendall Drive City Parlin State NJ Zip Code 08859 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02949-02949 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. July J. Davila Full Name (Last, First, Middle Initial) Mailing Address 37 Kendall Drive City Parlin State NJ Zip Code 08859 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02950-02950 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melvi Davila		Transaction ID: 30b-21-02951-02951 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 300.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Maria De Leon		Transaction ID: 30b-21-02952-02952 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 450 Division		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Christian Estevez		Transaction ID: 30b-21-02953-02953 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1352 Murray Avenue		Amount of Each Disbursement this Period 600.00
City Plainfield State NJ Zip Code 07060	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jacqueline Lacayo Full Name (Last, First, Middle Initial) Mailing Address 251 Fulton Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02954-02954 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 360.00 Category/Type
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B. Gilberta Menes Full Name (Last, First, Middle Initial) Mailing Address 22 Louis Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02955-02955 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Stephanie Rosa Full Name (Last, First, Middle Initial) Mailing Address 95 West Dewey Avenue City Wharton State NJ Zip Code 07885 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02956-02956 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	760.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Juan C. Solis		Transaction ID: 30b-21-02957-02957 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00	
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Magdalena Vasquez		Transaction ID: 30b-21-02958-02958 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Jose Zegarra		Transaction ID: 30b-21-02959-02959 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 129 Devon Street, Apartment 2		Amount of Each Disbursement this Period 50.00	
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ruslan Aliev Full Name (Last, First, Middle Initial) Mailing Address 338 Horizon Drive City Edison State NJ Zip Code 08817 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02960-02960 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 312.00 Category/Type
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B. Dawn Ambrose Full Name (Last, First, Middle Initial) Mailing Address 3111 Birchwood Court City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02961-02961 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Michael Anis Full Name (Last, First, Middle Initial) Mailing Address 45 Lahiere Avenue City Edison State NJ Zip Code 08817 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02962-02962 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 390.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	762.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sufia Azher		Transaction ID: 30b-21-02963-02963 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 84A Cedar Lane		Amount of Each Disbursement this Period 126.00	
City Highland Park State NJ Zip Code 08904	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Susan Ball		Transaction ID: 30b-21-02964-02964 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 68 Park Avenue Apartment 405		Amount of Each Disbursement this Period 780.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Nick Brener		Transaction ID: 30b-21-02965-02965 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 114.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1020.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. William Brier Full Name (Last, First, Middle Initial) Mailing Address 18 Norman Street City Edison State NJ Zip Code 08837 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02966-02966 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 144.00 Category/Type
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B. Jonathan Collado Full Name (Last, First, Middle Initial) Mailing Address 677 Wood Avenue City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02967-02967 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 252.00 Category/Type
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C. Deyra Diril Full Name (Last, First, Middle Initial) Mailing Address 5 Dana Circle City Edison State NJ Zip Code 08820 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02969-02969 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 108.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	504.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gary Feng		Transaction ID: 30b-21-02971-02971 Date of Disbursement 11 / 03 / 2006	
Mailing Address 15 Rutledge Court		Amount of Each Disbursement this Period 60.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ian Forrester		Transaction ID: 30b-21-02972-02972 Date of Disbursement 11 / 03 / 2006	
Mailing Address 1769 West 5th		Amount of Each Disbursement this Period 60.00	
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Anderson Garcia		Transaction ID: 30b-21-02973-02973 Date of Disbursement 11 / 03 / 2006	
Mailing Address 98 Welton Street		Amount of Each Disbursement this Period 84.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	204.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Conner Gill Full Name (Last, First, Middle Initial) Mailing Address 6 Rydal Place City Montclair State NJ Zip Code 07042 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02975-02975 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 315.00 Category/Type
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B. James Griffin Full Name (Last, First, Middle Initial) Mailing Address 15 School Street City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02976-02976 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 456.00 Category/Type
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C. Gaesha Hayes Full Name (Last, First, Middle Initial) Mailing Address 312 North 3rd Avenue City Highland Park State NJ Zip Code 08904 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02977-02977 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 948.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1719.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Darnell Johnson		Transaction ID: 30b-21-02978-02978 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 13 Kloster Boulevard Apt 7C		Amount of Each Disbursement this Period 828.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Tania Jones		Transaction ID: 30b-21-02979-02979 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 727 Magnolia Road		Amount of Each Disbursement this Period 547.20
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. George Kostis		Transaction ID: 30b-21-02984-02984 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 250 Main Street Apt. 22		Amount of Each Disbursement this Period 312.00
City Spotswood State NJ Zip Code 08884	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1687.20
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Jasmine Lawrence Lewis Ileks</p>		<p>Transaction ID: 30b-21-02985-02985 Date of Disbursement</p>
<p>Mailing Address 59 Royal Drive Apt 211</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City State Zip Code Piscataway NJ 08854</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Jasmine Lawrence Lewis Ileks</p>		<p>Transaction ID: 30b-21-02986-02986 Date of Disbursement</p>
<p>Mailing Address 59 Royal Drive Apt 211</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City State Zip Code Piscataway NJ 08854</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Megan Melone</p>		<p>Transaction ID: 30b-21-02988-02988 Date of Disbursement</p>
<p>Mailing Address 107 Devon Road</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City State Zip Code Cinnaminson NJ 08077</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1050.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brenda Parker		Transaction ID: 30b-21-02989-02989 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 696B Cranbury Cross Road		Amount of Each Disbursement this Period 426.00	
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sheshang Patel		Transaction ID: 30b-21-02990-02990 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 37103 RPO Wy		Amount of Each Disbursement this Period 48.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Prignano		Transaction ID: 30b-21-02992-02992 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 114.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	588.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Tahira Rafiq</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1 Lisa Court</p> <p>City East Brunswick State NJ Zip Code 08816</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-02993-02993</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>B. Christian Rocha</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 36 Quentin Avenue</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-02994-02994</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="90.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>C. Ryan Sales</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 493 Ryders Lane</p> <p>City East Brunswick State NJ Zip Code 08816</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-02995-02995</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="765.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="915.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tanya Santiago		Transaction ID: 30b-21-02996-02996 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 114.00
City Somerset State NJ Zip Code 08873		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Neelam Sarwar		Transaction ID: 30b-21-02997-02997 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1609 Westminster Blvd.		Amount of Each Disbursement this Period 60.00
City Parlin State NJ Zip Code 08859		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paul Scott		Transaction ID: 30b-21-02998-02998 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 196 Oakland Avenue		Amount of Each Disbursement this Period 240.00
City Somerset State NJ Zip Code 08873		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	414.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Nia Shabazz Full Name (Last, First, Middle Initial) Mailing Address 1102 Woodhaven Drive City Edison State NJ Zip Code 08817 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-02999-02999 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 996.00 Category/Type
B. Ilya Slavinski Full Name (Last, First, Middle Initial) Mailing Address 6 Armstrong Avenue City Wayne State NJ Zip Code 07470 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03000-03000 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 36.00 Category/Type
C. Gerald Terrell Full Name (Last, First, Middle Initial) Mailing Address 33 Commercial Avenue Apt. 60 City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03001-03001 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 288.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

1320.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melanie Thompson		Transaction ID: 30b-21-03003-03003 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 145 Seaman Street		Amount of Each Disbursement this Period 30.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Sapaksh Vij		Transaction ID: 30b-21-03004-03004 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 95 East Flagge St.		Amount of Each Disbursement this Period 168.00
City Rockaway State NJ Zip Code 07866	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Li Wang		Transaction ID: 30b-21-03005-03005 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 36 Christian Drive		Amount of Each Disbursement this Period 60.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	258.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sherry White		Transaction ID: 30b-21-03006-03006 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 181 Redmond Street		Amount of Each Disbursement this Period 366.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Shawn Wilkinson		Transaction ID: 30b-21-03007-03007 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 3918 Herbertsville Road		Amount of Each Disbursement this Period 180.00	
City Point Pleasant State NJ Zip Code 08742	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Brian Williams		Transaction ID: 30b-21-03009-03009 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 34 Pin Oak Drive		Amount of Each Disbursement this Period 102.00	
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	648.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ebony Williams		Transaction ID: 30b-21-03010-03010 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 40 Quentin Avenue		Amount of Each Disbursement this Period 114.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Daniel Winters		Transaction ID: 30b-21-03011-03011 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 79 Harmon Road		Amount of Each Disbursement this Period 36.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kenneth Woods		Transaction ID: 30b-21-03012-03012 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 173 Throop Avenue		Amount of Each Disbursement this Period 1000.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kenneth Woods Full Name (Last, First, Middle Initial) Mailing Address 173 Throop Avenue City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03013-03013 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 140.00 Category/Type
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B. Khnam Begum Full Name (Last, First, Middle Initial) Mailing Address 19 Bell Lane City Burlington Twp State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03014-03014 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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C. Sonya Booker Full Name (Last, First, Middle Initial) Mailing Address 29 Riverside Drive City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03015-03015 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	510.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kevin Burke Full Name (Last, First, Middle Initial) Mailing Address 216 Bald Eagle Drive City Stewartsville State NJ Zip Code 08886 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03016-03016 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 65.00 Category/Type
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B. Cassandra Camon Full Name (Last, First, Middle Initial) Mailing Address 357 Girard Avenue City Somerset State NJ Zip Code 08873 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03017-03017 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 250.00 Category/Type
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C. Alana Cantilo Full Name (Last, First, Middle Initial) Mailing Address 44 High Street City Clifton State NJ Zip Code 07014 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03018-03018 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 90.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	405.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clarimel Cepeda		Transaction ID: 30b-21-03019-03019 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 65 Ampere Parkway		Amount of Each Disbursement this Period 418.21
City East Orange State NJ Zip Code 07017	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Andre Childs		Transaction ID: 30b-21-03020-03020 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 382 Dryden		Amount of Each Disbursement this Period 479.20
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jon Cusack		Transaction ID: 30b-21-03021-03021 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 6 Taylor Road		Amount of Each Disbursement this Period 130.00
City Princeton State NJ Zip Code 08540	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1027.41
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Steven Delia		Transaction ID: 30b-21-03022-03022 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 37 Division Street Apt 2		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jamila Ford		Transaction ID: 30b-21-03023-03023 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 1 A - B May Street		Amount of Each Disbursement this Period 265.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jerry Ford		Transaction ID: 30b-21-03024-03024 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 1179 East 13 Mile Road		Amount of Each Disbursement this Period 200.00	
City Warren State MI Zip Code 40893	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	515.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shanelle Foster		Transaction ID: 30b-21-03025-03025 Date of Disbursement 11 / 03 / 2006	
Mailing Address 65 Baldwin Street		Amount of Each Disbursement this Period 395.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Abdul Glover		Transaction ID: 30b-21-03026-03026 Date of Disbursement 11 / 03 / 2006	
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 260.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Daniel Gutierrez		Transaction ID: 30b-21-03027-03027 Date of Disbursement 11 / 03 / 2006	
Mailing Address 6018 Jefferson Street		Amount of Each Disbursement this Period 46.70	
City West New York State NJ Zip Code 07093	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	701.70
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Giselle Herrera Full Name (Last, First, Middle Initial) Mailing Address 26870 DPO Way City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03028-03028 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 125.00 Category/Type
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B. Darry Kemp Full Name (Last, First, Middle Initial) Mailing Address 382 Drydon Street City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03029-03029 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 125.00 Category/Type
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C. Jasmine Lyons Full Name (Last, First, Middle Initial) Mailing Address 174 Fulston City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03030-03030 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 335.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	585.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. James Martinez Full Name (Last, First, Middle Initial) Mailing Address 445 East 5th Street City Plainfield State NJ Zip Code 07060 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03031-03031 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 270.00 Category/Type
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B. Samuel Pegram Full Name (Last, First, Middle Initial) Mailing Address 4702 Rockwood Drive City Houston State TX Zip Code 77004 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03032-03032 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 180.00 Category/Type
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C. Michael Robinson Full Name (Last, First, Middle Initial) Mailing Address 20-22 Abeel Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03033-03033 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 630.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1080.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gregory Shtivelman		Transaction ID: 30b-21-03034-03034 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3 Tunison Court		Amount of Each Disbursement this Period 200.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cali Smith		Transaction ID: 30b-21-03035-03035 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 510 McCandless Street		Amount of Each Disbursement this Period 595.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Isaiah Tate		Transaction ID: 30b-21-03037-03037 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 138 Jones Avenue		Amount of Each Disbursement this Period 262.50
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1057.50
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kathy Williams		Transaction ID: 30b-21-03038-03038 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 65 Baldwin Avenue		Amount of Each Disbursement this Period 330.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Dawun Williams		Transaction ID: 30b-21-03039-03039 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 65 Baldwin Street		Amount of Each Disbursement this Period 277.50
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ronald Woods		Transaction ID: 30b-21-03040-03040 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 51 Schmidt Lane #61A		Amount of Each Disbursement this Period 205.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	812.50
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bianca Arambulo		Transaction ID: 30b-21-03041-03041 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 150 Harrison Street #2		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Chanelle Arambulo		Transaction ID: 30b-21-03042-03042 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 150 Harrison Street #2		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Ana Carvajal		Transaction ID: 30b-21-03044-03044 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 26 Grace Avenue		Amount of Each Disbursement this Period 50.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Cespedes		Transaction ID: 30b-21-03045-03045 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 250 Harrison Street #2B		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Angel Cruz		Transaction ID: 30b-21-03046-03046 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 15 Sherman Street		Amount of Each Disbursement this Period 150.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Luz Figuero		Transaction ID: 30b-21-03047-03047 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 46 Sherman Street 2nd Floor		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Ricardo Gomez</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3 Lucille Place #12</p> <p>City Passaic State NJ Zip Code 07055</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03048-03048</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Pedro Gonzalez</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 123 Passaic Street #3</p> <p>City Passaic State NJ Zip Code 07055</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03049-03049</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Luis Goris</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 177 8th Street</p> <p>City Passaic State NJ Zip Code 07055</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03050-03050</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ysabel Hernandez		Transaction ID: 30b-21-03051-03051 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Johnny Martinez		Transaction ID: 30b-21-03052-03052 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 204 President Street #220		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Luilly Mendez		Transaction ID: 30b-21-03053-03053 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 27 Ann Street, Apartment 6		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Fior Menier Full Name (Last, First, Middle Initial) Mailing Address 498 Boulevard City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03054-03054 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Juan Carlos Mota Full Name (Last, First, Middle Initial) Mailing Address 233 Monroe Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03055-03055 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Diana Polanco Full Name (Last, First, Middle Initial) Mailing Address 32 Myrtle Avenue, Apartment 5 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03056-03056 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ely Polanco		Transaction ID: 30b-21-03057-03057 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 242 Totowa Road		Amount of Each Disbursement this Period 200.00
City Totowa State NJ Zip Code 07512	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marino Polanco		Transaction ID: 30b-21-03058-03058 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 100.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Deivis Reyes		Transaction ID: 30b-21-03059-03059 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 147 Summer Street		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael Rivera Full Name (Last, First, Middle Initial) Mailing Address 53 Park Avenue Apt 2 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03060-03060 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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B. Carlos Rodriguez Full Name (Last, First, Middle Initial) Mailing Address 100 Passaic Street Apt 4G City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03061-03061 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Nina Roman Full Name (Last, First, Middle Initial) Mailing Address 82 Maitland Place City Garfield State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03063-03063 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 120.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Roberto Rosario Full Name (Last, First, Middle Initial) Mailing Address 177 Eight Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03064-03064 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Joel Rufino Full Name (Last, First, Middle Initial) Mailing Address 20 4th Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03065-03065 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Yudis Siri Full Name (Last, First, Middle Initial) Mailing Address 188 Myrtle Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03066-03066 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mennio Soto		Transaction ID: 30b-21-03067-03067 Date of Disbursement 11 / 03 / 2006	
Mailing Address 20 Henderson Street		Amount of Each Disbursement this Period 100.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gira Tejeda		Transaction ID: 30b-21-03068-03068 Date of Disbursement 11 / 03 / 2006	
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 200.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joel Toribio		Transaction ID: 30b-21-03069-03069 Date of Disbursement 11 / 03 / 2006	
Mailing Address 194 8th Street Apartment 1		Amount of Each Disbursement this Period 200.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Alexander Urban Full Name (Last, First, Middle Initial) Mailing Address 324 Pennington Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03072-03072 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Jason Urban Full Name (Last, First, Middle Initial) Mailing Address 324 Pennington Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03073-03073 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 450.00 Category/Type
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C. Francisco Vallejo Full Name (Last, First, Middle Initial) Mailing Address 162 Gregory Ave, #9 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03074-03074 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Monica Compre</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 9 Fleet Street</p> <p>City Jersey City State NJ Zip Code 07306</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03075-03075</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Erick Camacho</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 100 Montgomery Street Apt 24C</p> <p>City Jersey City State NJ Zip Code 07306</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03076-03076</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Vanessa Normand</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 415 Baldwin Avenue</p> <p>City Jersey City State NJ Zip Code 07306</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03077-03077</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="400.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cinthya Toledo		Transaction ID: 30b-21-03078-03078 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 111 Lincoln Street		Amount of Each Disbursement this Period 190.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Johanna Recinos		Transaction ID: 30b-21-03079-03079 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 7 Main Terrace		Amount of Each Disbursement this Period 200.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Joseph Pagan		Transaction ID: 30b-21-03080-03080 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 162 Third Street Apt 86		Amount of Each Disbursement this Period 250.00	
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Elizabeth De Jesus		Transaction ID: 30b-21-03081-03081 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 73 Hancock Avenue		Amount of Each Disbursement this Period 200.00
City Jersey City State NJ Zip Code 07307	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jessica Brodie		Transaction ID: 30b-21-03082-03082 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 36 Highland Avenue		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Samantha Hernandez		Transaction ID: 30b-21-03083-03083 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 319 Fairmount Avenue Apt. 1		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07307	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carol Normand		Transaction ID: 30b-21-03084-03084 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Javier Arroyo		Transaction ID: 30b-21-03085-03085 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 100 Montgomery Street Apartment 15		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maurice Wayne		Transaction ID: 30b-21-03088-03088 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 49 Gardner Avenue		Amount of Each Disbursement this Period 180.00
City Jersey City State NJ Zip Code 07304		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Genevieve Abrams Full Name (Last, First, Middle Initial) Mailing Address 2412 North Pallor City Philadelphia State PA Zip Code 19132 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03089-03089 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 280.00 Category/Type
--	--	---

B. Tyrese Beatty Full Name (Last, First, Middle Initial) Mailing Address 1408 Newkirk St. City Philadelphia State PA Zip Code 19121 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03090-03090 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 180.00 Category/Type
--	--	---

C. Megan Blackburn Full Name (Last, First, Middle Initial) Mailing Address 2029 North Broad Street City Philadelphia State PA Zip Code 19122 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03091-03091 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 280.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	740.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shawn-Douglas Brown		Transaction ID: 30b-21-03093-03093 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1147 South Wilton Street		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19143	Purpose of Disbursement Field Consulting Services Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Norton Casha		Transaction ID: 30b-21-03095-03095 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 5526 Crowson Street		Amount of Each Disbursement this Period 230.00
City Philadelphia State PA Zip Code 19144	Purpose of Disbursement Field Consulting Services Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Guy Collina		Transaction ID: 30b-21-03099-03099 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1320 South Divinity Street		Amount of Each Disbursement this Period 240.00
City Philadelphia State PA Zip Code 19143	Purpose of Disbursement Field Consulting Services Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	570.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Regina Cooper		Transaction ID: 30b-21-03101-03101 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3862 West Frankin		Amount of Each Disbursement this Period 170.00
City Philadelphia State PA Zip Code 19146	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gloria Crittenden		Transaction ID: 30b-21-03102-03102 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2820 N. Stillman Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19132	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lorraine Daliessio		Transaction ID: 30b-21-03104-03104 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 843 North Lawrence Street		Amount of Each Disbursement this Period 480.00
City Philadelphia State PA Zip Code 19106	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	830.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 804 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Saul Delvalle		Transaction ID: 30b-21-03106-03106 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 205 East Monmouth Street		Amount of Each Disbursement this Period 290.00
City Philadelphia State PA Zip Code 19134	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Gail Gayle		Transaction ID: 30b-21-03108-03108 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3209 West Clifford Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Matthew Gibson		Transaction ID: 30b-21-03109-03109 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2429 South 12th Street		Amount of Each Disbursement this Period 400.00
City Philadelphia State PA Zip Code 19148	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	870.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 805 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gonzalez Juan		Transaction ID: 30b-21-03110-03110 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2055 East Monmouth Street		Amount of Each Disbursement this Period 290.00
City Philadelphia State PA Zip Code 19134		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Soyni Grimes		Transaction ID: 30b-21-03111-03111 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3845 North Franklin Street		Amount of Each Disbursement this Period 300.00
City Philadelphia State PA Zip Code 19122		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Faith Harrison		Transaction ID: 30b-21-03112-03112 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1233 South 18th Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19146		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Hayden		Transaction ID: 30b-21-03113-03113 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1413 South 4th Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19147		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jillian Irwin		Transaction ID: 30b-21-03116-03116 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 5615 Aylesboro Avenue		Amount of Each Disbursement this Period 400.00
City Pittsburgh State PA Zip Code 15217		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Manuel Jose		Transaction ID: 30b-21-03121-03121 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1565 Collings Road		Amount of Each Disbursement this Period 288.00
City Camden State NJ Zip Code 08104		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	868.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 807 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ashir Khondker		Transaction ID: 30b-21-03123-03123	
Mailing Address 1423 South 4th Street		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City Philadelphia	State PA	Zip Code 19147	Amount of Each Disbursement this Period 180.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. James Lusardi		Transaction ID: 30b-21-03125-03125	
Mailing Address 1320 S. Divinity St.		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City Philadelphia	State PA	Zip Code 19143	Amount of Each Disbursement this Period 180.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Theresea Lyles		Transaction ID: 30b-21-03126-03126	
Mailing Address 3119 Clifford Street		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City Philadelphia	State PA	Zip Code 19121	Amount of Each Disbursement this Period 180.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	540.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 808 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kali Milgate		Transaction ID: 30b-21-03128-03128 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1300 Cecil B. Moore Ave S104		Amount of Each Disbursement this Period 200.00
City Philadelphia State PA Zip Code 19122		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeff Mott		Transaction ID: 30b-21-03129-03129 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 581 General Know Road		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19406		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Aziz Nifeesa		Transaction ID: 30b-21-03130-03130 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3412 A Street		Amount of Each Disbursement this Period 370.00
City Philadelphia State PA Zip Code 19134		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Piraneo		Transaction ID: 30b-21-03133-03133 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2139 Manton Street		Amount of Each Disbursement this Period 60.00
City Philadelphia State PA Zip Code 19146	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Trevor Polk		Transaction ID: 30b-21-03134-03134 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 30 Gylnn Court		Amount of Each Disbursement this Period 180.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Starlanda Pralour		Transaction ID: 30b-21-03135-03135 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3209 Clifford Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	420.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Jennifer Rice</p>		<p>Transaction ID: 30b-21-03136-03136 Date of Disbursement</p>
<p>Mailing Address 1423 South 4th Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Philadelphia State PA Zip Code 19147</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="360.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Nicole Richardson</p>		<p>Transaction ID: 30b-21-03137-03137 Date of Disbursement</p>
<p>Mailing Address 138 North Yewdall Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Philadelphia State PA Zip Code 19139</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Trina Rivers</p>		<p>Transaction ID: 30b-21-03138-03138 Date of Disbursement</p>
<p>Mailing Address 3120 North Sheridan</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Philadelphia State PA Zip Code 19121</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="840.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bezaleel Rojas		Transaction ID: 30b-21-03139-03139 Date of Disbursement 11 / 03 / 2006	
Mailing Address 35 South 33rd Street		Amount of Each Disbursement this Period 216.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Latesha Rucker		Transaction ID: 30b-21-03140-03140 Date of Disbursement 11 / 03 / 2006	
Mailing Address 116 North 51st Street		Amount of Each Disbursement this Period 240.00	
City Philadelphia State PA Zip Code 19139	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Roberto Segan		Transaction ID: 30b-21-03141-03141 Date of Disbursement 11 / 03 / 2006	
Mailing Address 526 Wilder Street		Amount of Each Disbursement this Period 360.00	
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	816.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Octavia Smith		Transaction ID: 30b-21-03144-03144 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3131 West Montgomery Avenue		Amount of Each Disbursement this Period 120.00
City Philadelphia State PA Zip Code 19121		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Joseph Smith		Transaction ID: 30b-21-03145-03145 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1614 South 27th Street		Amount of Each Disbursement this Period 170.00
City Philadelphia State PA Zip Code 19102		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Clarence Smith		Transaction ID: 30b-21-03146-03146 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2820 North Stillman Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19132		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	470.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Quenzellia Smith		Transaction ID: 30b-21-03147-03147 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3131 West Montgomery Avenue		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Stan Soroka		Transaction ID: 30b-21-03148-03148 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3338 Richlieu Rd. V307		Amount of Each Disbursement this Period 160.00
City Bensalem State PA Zip Code 19020	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Clinton Thomas		Transaction ID: 30b-21-03151-03151 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 3236 West Berk Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Ward		Transaction ID: 30b-21-03153-03153 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 2121 Bancroft Street		Amount of Each Disbursement this Period 180.00	
City Philadelphia State PA Zip Code 19148	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Deborah Wheeler		Transaction ID: 30b-21-03154-03154 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 2420 North 32nd Street		Amount of Each Disbursement this Period 290.00	
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dana Wheeler		Transaction ID: 30b-21-03155-03155 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 1420 North 32nd Street		Amount of Each Disbursement this Period 290.00	
City Philadelphia State PA Zip Code 19134	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	760.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) J. Richard Winborne		Transaction ID: 30b-21-03156-03156 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 215 South 49th Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19139		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Zykia Wright		Transaction ID: 30b-21-03157-03157 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 5934 North 12th Street		Amount of Each Disbursement this Period 160.00
City Philadelphia State PA Zip Code 19141		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Matthew Zinader		Transaction ID: 30b-21-03158-03158 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 404 Fernwood Avenue		Amount of Each Disbursement this Period 480.00
City Millville State NJ Zip Code 08332		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	820.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Adams		Transaction ID: 30b-21-03159-03159 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 301 North Wade Boulevard Apt 308		Amount of Each Disbursement this Period 340.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sharla Canion		Transaction ID: 30b-21-03162-03162 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 5636 West Buck Street		Amount of Each Disbursement this Period 300.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sherry Kennedy		Transaction ID: 30b-21-03171-03171 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1881 Mountain Drive		Amount of Each Disbursement this Period 370.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1010.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 817 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clara Luster		Transaction ID: 30b-21-03174-03174 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 2237 Helen Avenue		Amount of Each Disbursement this Period 490.00	
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lisa Luster		Transaction ID: 30b-21-03176-03176 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 566 Yale Avenue		Amount of Each Disbursement this Period 220.00	
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Timothy Luster		Transaction ID: 30b-21-03177-03177 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 830 East Elmer Street		Amount of Each Disbursement this Period 350.00	
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1060.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel DeJesus		Transaction ID: 30b-21-03193-03193 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 128 Green Street		Amount of Each Disbursement this Period 50.00
City Somerville State NJ Zip Code 08876	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Joseph Han		Transaction ID: 30b-21-03198-03198 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 80 Huntington St		Amount of Each Disbursement this Period 320.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Myung-Ja Hwang		Transaction ID: 30b-21-03199-03199 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 427 4th Street		Amount of Each Disbursement this Period 800.00
City Palisades Park State NJ Zip Code 07650	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1170.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jason Kim Full Name (Last, First, Middle Initial) Mailing Address 530 Glen Avenue City Palisades Park State NJ Zip Code 07650 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03200-03200 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 800.00 Category/Type
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B. Jennifer Kong Full Name (Last, First, Middle Initial) Mailing Address 219 Yellowknife Road City Morganville State NJ Zip Code 07751 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03201-03201 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 270.00 Category/Type
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C. Jessica Kwong Full Name (Last, First, Middle Initial) Mailing Address 371 Summit Avenue City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03203-03203 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 540.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1610.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Steven Leong		Transaction ID: 30b-21-03206-03206 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 80 Huntington Street		Amount of Each Disbursement this Period 440.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mengyi Luo		Transaction ID: 30b-21-03207-03207 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 37 Hazel Avenue		Amount of Each Disbursement this Period 300.00
City Livingston State NJ Zip Code 07039		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Truc Luu		Transaction ID: 30b-21-03208-03208 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address Whitehead Road		Amount of Each Disbursement this Period 270.00
City Bridgewater State NJ Zip Code 08807		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1010.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kuleen Mehta		Transaction ID: 30b-21-03209-03209 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 2523 Linn Avenue		Amount of Each Disbursement this Period 390.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rosella Melgar		Transaction ID: 30b-21-03210-03210 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 24 Peru Street		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ibrahim Mendonca		Transaction ID: 30b-21-03211-03211 Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 539 Green Street		Amount of Each Disbursement this Period 490.00	
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	930.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Eun L. Park		Transaction ID: 30b-21-03213-03213 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 320 East Central Boulevard		Amount of Each Disbursement this Period 800.00
City Palisades Park State NJ Zip Code 07650		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) Jin Young Park		Transaction ID: 30b-21-03214-03214 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 268 Cornwall Rd		Amount of Each Disbursement this Period 800.00
City Glen Rock State NJ Zip Code 07452		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) Yogesh Patel		Transaction ID: 30b-21-03215-03215 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1019 Adams Avenue		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1650.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Renee Raghoo Full Name (Last, First, Middle Initial) Mailing Address 435 79th Street City North Bergen State NJ Zip Code 07047 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03217-03217 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 210.00 Category/Type
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B. Jason Shih Full Name (Last, First, Middle Initial) Mailing Address 255 Washington Place City Paramus State NJ Zip Code 07652 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03218-03218 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 420.00 Category/Type
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C. Victor F Soliven Full Name (Last, First, Middle Initial) Mailing Address 4 Washington Road City Parlin State NJ Zip Code 08859 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03219-03219 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	680.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Meng-Yin Tang		Transaction ID: 30b-21-03220-03220	
Mailing Address 2506 Cricket Circle		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City Edison	State NJ	Zip Code 08820	Amount of Each Disbursement this Period 340.00
Purpose of Disbursement Field Consulting Services		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) B. Henry Tsauro		Transaction ID: 30b-21-03221-03221	
Mailing Address 160 A Easton Avenue		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City New Brunswick	State NJ	Zip Code 08901	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) C. Renato Valenzuela		Transaction ID: 30b-21-03222-03222	
Mailing Address 219 Summit Road		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City Elizabeth	State NJ	Zip Code 07208	Amount of Each Disbursement this Period 585.00
Purpose of Disbursement Field Consulting Services		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

SUBTOTAL of Disbursements This Page (optional)	975.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael Yang Full Name (Last, First, Middle Initial) Mailing Address 822 East Henry Street City Linden State NJ Zip Code 07036 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03224-03224 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 130.00 Category/Type
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B. Julie Yew Full Name (Last, First, Middle Initial) Mailing Address 125 Myrtle Avenue City Fort Lee State NJ Zip Code 07024 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03225-03225 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 800.00 Category/Type
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C. Katharyn Yew Full Name (Last, First, Middle Initial) Mailing Address 125 Myrtle Avenue City Fort Lee State NJ Zip Code 07024 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03226-03226 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 800.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1730.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. James Yi		Transaction ID: 30b-21-03227-03227 Date of Disbursement 11 / 03 / 2006	
Mailing Address 405 Park Avenue		Amount of Each Disbursement this Period 110.00	
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Song Yu		Transaction ID: 30b-21-03228-03228 Date of Disbursement 11 / 03 / 2006	
Mailing Address 675A Bruce Street		Amount of Each Disbursement this Period 800.00	
City Ridgefield State NJ Zip Code 07657	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Austin Ayers		Transaction ID: 30b-21-03230-03230 Date of Disbursement 11 / 03 / 2006	
Mailing Address 889 Edwards Road		Amount of Each Disbursement this Period 100.00	
City Parsippany State NJ Zip Code 07054	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1010.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shaun Tamayo		Transaction ID: 30b-21-03231-03231 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 188 Highland Cross		Amount of Each Disbursement this Period 50.00	
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elena Cesario		Transaction ID: 30b-21-03232-03232 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 443 B Marshall Street		Amount of Each Disbursement this Period 100.00	
City Paterson State NJ Zip Code 07503	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Robert Camalito		Transaction ID: 30b-21-03233-03233 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 11 Hickory Road		Amount of Each Disbursement this Period 50.00	
City Pequannock State NJ Zip Code 07440	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) John Bishop		Transaction ID: 30b-21-03234-03234 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 400 Broadway 4-G		Amount of Each Disbursement this Period 100.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Joan Ianetti		Transaction ID: 30b-21-03235-03235 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 21H Colonia Drive		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07424	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Veronica Yacco		Transaction ID: 30b-21-03236-03236 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 12 Hillside Road		Amount of Each Disbursement this Period 100.00
City Kinnelon State NJ Zip Code 07405	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jorge Morel Full Name (Last, First, Middle Initial) Mailing Address 128 East 8th Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03237-03237 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 40.00 Category/Type
--	--	--

B. Sharan Zarate Full Name (Last, First, Middle Initial) Mailing Address 10 Garretsee Avenue City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03238-03238 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
--	--	--

C. Corey McNeal Full Name (Last, First, Middle Initial) Mailing Address 726 Sixth Avenue City Lyndhurst State NJ Zip Code 07071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03239-03239 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 80.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	170.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rodney Soto		Transaction ID: 30b-21-03240-03240 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 87-89 Lincoln Avenue		Amount of Each Disbursement this Period 80.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Janice Latorre		Transaction ID: 30b-21-03241-03241 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 24 East Ninth Street		Amount of Each Disbursement this Period 50.00
City Clifton State NJ Zip Code 07011	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Martha Abraham		Transaction ID: 30b-21-03243-03243 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 295 Woodside Avenue		Amount of Each Disbursement this Period 350.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Milton Duran Full Name (Last, First, Middle Initial) Mailing Address 676 Highland Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03245-03245 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 525.00 Category/Type
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B. John Patino Full Name (Last, First, Middle Initial) Mailing Address 641 North 9th Street City Newark State NJ Zip Code 07107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03246-03246 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 525.00 Category/Type
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C. Paola Posso Full Name (Last, First, Middle Initial) Mailing Address 7 Davenport Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-03247-03247 Date of Disbursement 11 / 03 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1110.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marco Rodriguez		Transaction ID: 30b-21-03248-03248 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 307 Highland Avenue		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Antonio Santana		Transaction ID: 30b-21-03249-03249 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 300 Woodside Avenue		Amount of Each Disbursement this Period 350.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Richard Alua		Transaction ID: 30b-21-03251-03251 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 149 Ege Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ruwhiy Barrow		Transaction ID: 30b-21-03252-03252 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 218 Fulton Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kevin Diggs		Transaction ID: 30b-21-03254-03254 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 49 Clinton Avenue		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. James Diggs		Transaction ID: 30b-21-03255-03255 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 62 Rutgers Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Thomasina Dunton		Transaction ID: 30b-21-03256-03256 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 51 Grant Avenue 2nd Floor		Amount of Each Disbursement this Period 110.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jeffrey Felusme		Transaction ID: 30b-21-03257-03257 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 70 Wade Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sherri Fletcher		Transaction ID: 30b-21-03258-03258 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 230 West 5th Avenue		Amount of Each Disbursement this Period 130.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	290.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 835 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roland Goodson		Transaction ID: 30b-21-03260-03260 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 310 South Harrison Street		Amount of Each Disbursement this Period 90.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Tiona Hawkins		Transaction ID: 30b-21-03262-03262 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 164 Streetegman Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Angelique Thompson		Transaction ID: 30b-21-03298-03298 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 10 Dunhill Court		Amount of Each Disbursement this Period 120.00
City Voorhees State NJ Zip Code 08043	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Katherine Campbell</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2055 Lawrenceville Road</p> <p>City Lawrenceville State NJ Zip Code 08648</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03299-03299</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="90.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Enriquillo Jose</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 357 Morse Street</p> <p>City Camden State NJ Zip Code 08105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03300-03300</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="480.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Eric Wachter</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 19 East Broad Street Apt B</p> <p>City Palmyra State NJ Zip Code 08065</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-03303-03303</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="670.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Idida Rodriguez		Transaction ID: 30b-16-08625-08758 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 6
Mailing Address 272 Lakeiew Avenue, APT C24		Amount of Each Disbursement this Period 5000.00
City Paterson State NJ Zip Code 07503	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Linda Watkins Brashear		Transaction ID: 30b-22-00089-00105 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 6
Mailing Address 45 Nutman Place		Amount of Each Disbursement this Period 3000.00
City West Orange State NJ Zip Code 07062	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Lisa Scott		Transaction ID: 30b-22-00090-00106 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 6
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 1500.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9500.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) 1-800-Locksmith		Transaction ID: 30b-22-00091-00107 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 6
Mailing Address 73 Greentreet Drive		Amount of Each Disbursement this Period 267.00
City Dover State DE Zip Code 19904	Purpose of Disbursement Office Services - Facilities Maintenance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car		Transaction ID: 30b-22-00092-00108 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 6
Mailing Address 3011 Admiral Wilson Boulevard		Amount of Each Disbursement this Period 2142.87
City Pennsauken State NJ Zip Code 08109	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) La Perla Restaurant		Transaction ID: 30b-22-00093-00109 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 6
Mailing Address 227 Market Street		Amount of Each Disbursement this Period 2000.00
City Camden State NJ Zip Code 08102	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4409.87
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Oscar N James		Transaction ID: 30b-22-00088-00104 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 6
Mailing Address 68 Vaughan Drive		Amount of Each Disbursement this Period 10000.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Solkenn Wireless		Transaction ID: 30b-22-00094-00110 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 6
Mailing Address 21 Union Street		Amount of Each Disbursement this Period 750.00
City Lodi State NJ Zip Code 07644	Purpose of Disbursement Telecommunications Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Puerto Rican Community Association		Transaction ID: 30b-22-00095-00111 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 6
Mailing Address 362 South Broad Street		Amount of Each Disbursement this Period 350.00
City Trenton State NJ Zip Code 08611	Purpose of Disbursement Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	11100.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. B&G Broadway Bagels, Inc.		Transaction ID: 30b-22-00097-00113
Mailing Address 105 South Broadway		Date of Disbursement MM / DD / YYYY 11 / 06 / 2006
City South Amboy	State NJ	Amount of Each Disbursement this Period 600.00
Zip Code 08879		
Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jerry's		Transaction ID: 30b-22-00098-00114
Mailing Address 410 South Dean Street		Date of Disbursement MM / DD / YYYY 11 / 06 / 2006
City Englewood	State NJ	Amount of Each Disbursement this Period 309.77
Zip Code 07631		
Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Ritzy Moralez		Transaction ID: 30b-22-00099-00115
Mailing Address 55 Aycrigg Avenue		Date of Disbursement MM / DD / YYYY 11 / 06 / 2006
City Passaic	State NJ	Amount of Each Disbursement this Period 4000.00
Zip Code 07055		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ►

4909.77

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Union Baptist Temple Church		Transaction ID: 30b-22-00100-00116 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 208 East Commerce Street		Amount of Each Disbursement this Period 250.00
City Bridgeton State NJ Zip Code 08302	Purpose of Disbursement Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car		Transaction ID: 30b-22-00101-00117 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1155 South Delsea Drive		Amount of Each Disbursement this Period 2466.72
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Enterprise Rent-A-Car		Transaction ID: 30b-22-00102-00118 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1155 South Delsea Drive		Amount of Each Disbursement this Period 329.76
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	3046.48
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Lucia LLC</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 11 Washington Street</p> <p>City Bridgeton State NJ Zip Code 08302</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-22-00103-00119</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2675.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Ramada Inn</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2216 W. Landis Avenue</p> <p>City Vineland State NJ Zip Code 08380</p> <p>Purpose of Disbursement Site Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-22-00105-00121</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1755.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Rafferty Gourmet</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 106 Albany Street</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-22-00106-00122</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1772.25"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="6202.25"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Wawa		Transaction ID: 30b-22-00110-00126 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1814 Salem Road		Amount of Each Disbursement this Period 1250.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Amerada Hess Express		Transaction ID: 30b-22-00112-00128 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 232 Route 18 North		Amount of Each Disbursement this Period 500.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. IBEW Local #351		Transaction ID: 30b-22-00113-00129 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1837 North East Boulevard		Amount of Each Disbursement this Period 500.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Enterprise Rent-a-Car		Transaction ID: 30b-22-00114-00130 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 750 Walnut Avenue		Amount of Each Disbursement this Period 600.00
City Cranford State NJ Zip Code 07016		
Purpose of Disbursement Travel Expenses Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: 30b-22-00202-00225 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 30.00
City Trenton State NJ Zip Code 08608		
Purpose of Disbursement Service Charge Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 30b-16-08713-08846 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 150 West State Street		Amount of Each Disbursement this Period 10.00
City Trenton State NJ Zip Code 08608		
Purpose of Disbursement Service Charge Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Route 1 Auto Rental		Transaction ID: 30b-22-00116-00132 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1525 Route 1		Amount of Each Disbursement this Period 417.30
City North Brunswick State NJ Zip Code 08902	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hilton East Brunswick		Transaction ID: 30b-22-00117-00133 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Tower Center Boulevard		Amount of Each Disbursement this Period 5887.78
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hilton East Brunswick		Transaction ID: 30b-22-00117-00134 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Tower Center Boulevard		Amount of Each Disbursement this Period 17844.30
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	24149.38
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-22-00121-00139
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 238.08	

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-22-00122-00140
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 238.08	

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-22-00123-00141
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 238.08	

SUBTOTAL of Disbursements This Page (optional)	714.24
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-22-00124-00142
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Amount of Each Disbursement this Period 238.08
Zip Code 07114		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-22-00125-00143
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Amount of Each Disbursement this Period 238.08
Zip Code 07114		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-22-00126-00144
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Amount of Each Disbursement this Period 238.08
Zip Code 07114		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	714.24
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-22-00127-00145
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 238.08	

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-22-00128-00146
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 238.08	

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-22-00129-00147
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 238.08	

SUBTOTAL of Disbursements This Page (optional)	714.24
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-22-00130-00148
Mailing Address Newark Airport, Building #28		Date of Disbursement 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 238.08
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-22-00131-00149
Mailing Address Newark Airport, Building #28		Date of Disbursement 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 238.08
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-22-00132-00150
Mailing Address Newark Airport, Building #28		Date of Disbursement 11 / 07 / 2006
City Newark	State NJ	Zip Code 07114
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 238.08
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	714.24
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-22-00133-00151	
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Newark	State NJ	Zip Code 07114	Amount of Each Disbursement this Period 238.08
Purpose of Disbursement Travel Expenses		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-22-00134-00152	
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Newark	State NJ	Zip Code 07114	Amount of Each Disbursement this Period 238.08
Purpose of Disbursement Travel Expenses		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-22-00135-00153	
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Newark	State NJ	Zip Code 07114	Amount of Each Disbursement this Period 238.08
Purpose of Disbursement Travel Expenses		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	714.24
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-22-00136-00154
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Amount of Each Disbursement this Period 238.08
Zip Code 07114		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-22-00137-00155
Mailing Address Newark Airport, Building #28		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Amount of Each Disbursement this Period 238.08
Zip Code 07114		
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Sherri Fletcher		Transaction ID: 30b-22-00140-00158
Mailing Address 230 West 5th Avenue		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Jersey City	State NJ	Amount of Each Disbursement this Period 1500.00
Zip Code 07306		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1976.16
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Route 1 Auto Rental		Transaction ID: 30b-22-00141-00159	
Mailing Address 1525 Route 1		Date of Disbursement 11 / 07 / 2006	
City North Brunswick	State NJ	Zip Code 08902	Amount of Each Disbursement this Period 417.30
Purpose of Disbursement Food & Beverage		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Cathy McRae		Transaction ID: 30b-21-03472-03472	
Mailing Address 34 Hamilton Lane		Date of Disbursement 11 / 07 / 2006	
City Willingboro	State NJ	Zip Code 08046	Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Elayna Stribling		Transaction ID: 30b-21-03486-03486	
Mailing Address 15 Quincy Manor Lane		Date of Disbursement 11 / 07 / 2006	
City Burlington	State NJ	Zip Code 08046	Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	567.30
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Erica Stribling		Transaction ID: 30b-21-03487-03487 Date of Disbursement 11 / 07 / 2006	
Mailing Address 15 Quincy Manor		Amount of Each Disbursement this Period 75.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For:		

Full Name (Last, First, Middle Initial) B. Glenda Stribling		Transaction ID: 30b-21-03488-03488 Date of Disbursement 11 / 07 / 2006	
Mailing Address 27 Eflend Lane		Amount of Each Disbursement this Period 75.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For:		

Full Name (Last, First, Middle Initial) C. Mildred Stribling		Transaction ID: 30b-21-03489-03489 Date of Disbursement 11 / 07 / 2006	
Mailing Address 38 Hamilton Lane		Amount of Each Disbursement this Period 75.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Terry Thornton		Transaction ID: 30b-21-03830-03830 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 17 Tallwood Lane		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Laurie Acevedo		Transaction ID: 30b-21-03860-03860 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 980 Southard Street		Amount of Each Disbursement this Period 75.00
City Trenton State NJ Zip Code 08638	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kenneth B. Sorrell		Transaction ID: 30b-21-04209-04209 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 268 Seaman Street		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Idamis Perez Margicin Full Name (Last, First, Middle Initial) Mailing Address 51 Camp Avenue City Hamilton State NJ Zip Code 08610 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04420-04420 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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B. Carlos Hendricks Full Name (Last, First, Middle Initial) Mailing Address 157 Lawrenceville-Pennington Road City Lawrenceville State NJ Zip Code 08648 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04421-04421 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 250.00 Category/Type
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C. Teodor Kostadinov Full Name (Last, First, Middle Initial) Mailing Address 28 Christina Street City Little Ferry State NJ Zip Code 07643 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05253-05253 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Surachman		Transaction ID: 30b-21-05254-05254 Date of Disbursement 11 / 07 / 2006	
Mailing Address 11 Southwind Circle		Amount of Each Disbursement this Period 50.00	
City Jackson State NJ Zip Code 08527	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Daniel Valenti		Transaction ID: 30b-21-05255-05255 Date of Disbursement 11 / 07 / 2006	
Mailing Address 8 Baker Street		Amount of Each Disbursement this Period 50.00	
City Iselin State NJ Zip Code 08830	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Brian Cardines		Transaction ID: 30b-21-05260-05260 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1037 Harding Avenue		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Francisco Melendez		Transaction ID: 30b-21-05324-05324 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2101 Briarwood Lane		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Noble Lester		Transaction ID: 30b-21-05335-05335 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 21 Euclid Avenue		Amount of Each Disbursement this Period 50.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Britney Wyatt		Transaction ID: 30b-21-05344-05344 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 387 Creasant Drive		Amount of Each Disbursement this Period 50.00
City Franklin Lakes State NJ Zip Code 07417	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Carl Dixon Full Name (Last, First, Middle Initial) Mailing Address 26 Walnut Street City Teaneck State NJ Zip Code 07666 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05359-05359 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Mazzolas Cafe Full Name (Last, First, Middle Initial) Mailing Address 254 Midland Avenue City Garfield State NJ Zip Code Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05382-05382 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
--	--	--

C. Mazzolas Cafe Full Name (Last, First, Middle Initial) Mailing Address 254 Midland Avenue City Garfield State NJ Zip Code Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05386-05386 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mildred Seward		Transaction ID: 30b-21-05387-05387 Date of Disbursement 11 / 07 / 2006
Mailing Address 135 East Lawn Drive		Amount of Each Disbursement this Period 50.00
City Teaneck State NJ Zip Code 07666	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Eduardo Whitt		Transaction ID: 30b-21-05393-05393 Date of Disbursement 11 / 07 / 2006
Mailing Address 2523 Standish Avenue		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Russell Bravo		Transaction ID: 30b-21-05394-05394 Date of Disbursement 11 / 07 / 2006
Mailing Address 655 Palisade Road		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shelly Mack		Transaction ID: 30b-21-05418-05418 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 22 Leving Street		Amount of Each Disbursement this Period 50.00	
City South Hackensack State NJ Zip Code 07606	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Yulieth Pena		Transaction ID: 30b-21-05419-05419 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 32 Fairmont Avenue Apt 4		Amount of Each Disbursement this Period 50.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Priscilla Caicedo		Transaction ID: 30b-21-05423-05423 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 710 Bergen Avenue		Amount of Each Disbursement this Period 50.00	
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Francisco Melendez</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2101 Briarwood Lane</p> <p>City Union State NJ Zip Code 07083</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-05424-05424</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>B. Daniel Valenti</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 8 Baker Street</p> <p>City Iselin State NJ Zip Code 08830</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-05429-05429</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>C. Eduardo Whitt</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2523 Standish Avenue</p> <p>City Union State NJ Zip Code 07083</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-05432-05432</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Britney Wyatt		Transaction ID: 30b-21-05434-05434 Date of Disbursement 11 / 07 / 2006	
Mailing Address 387 Creasant Drive		Amount of Each Disbursement this Period 50.00	
City Franklin Lakes State NJ Zip Code 07417	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Caitlin Florance		Transaction ID: 30b-21-05435-05435 Date of Disbursement 11 / 07 / 2006	
Mailing Address 90 Cedar Street		Amount of Each Disbursement this Period 50.00	
City Midland Park State NJ Zip Code 07432	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Defelice		Transaction ID: 30b-21-05438-05438 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Maiden Road		Amount of Each Disbursement this Period 50.00	
City Little Ferry State NJ Zip Code 07643	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Teodor Kostadinov		Transaction ID: 30b-21-05439-05439 Date of Disbursement 11 / 07 / 2006
Mailing Address 28 Christina Street		Amount of Each Disbursement this Period 50.00
City Little Ferry	State NJ	
Zip Code 07643	Purpose of Disbursement Field Consulting Services	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Rossana Stella		Transaction ID: 30b-21-05440-05440 Date of Disbursement 11 / 07 / 2006
Mailing Address 242 Donaldson Avenue		Amount of Each Disbursement this Period 50.00
City Rutherford	State NJ	
Zip Code 07070	Purpose of Disbursement Field Consulting Services	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Eugene Fernandez		Transaction ID: 30b-21-05443-05443 Date of Disbursement 11 / 07 / 2006
Mailing Address 18 Park Avenue		Amount of Each Disbursement this Period 50.00
City Kearny	State NJ	
Zip Code 07032	Purpose of Disbursement Field Consulting Services	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brian Louvado		Transaction ID: 30b-21-05445-05445 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 122 Tappan Street		Amount of Each Disbursement this Period 50.00
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Surachman		Transaction ID: 30b-21-05450-05450 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 11 Southwind Circle		Amount of Each Disbursement this Period 50.00
City Jackson State NJ Zip Code 08527	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Russell Bravo		Transaction ID: 30b-21-05454-05454 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 655 Palisade Road		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Esperanza Flores		Transaction ID: 30b-21-05473-05473 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 26 Pulaski Place		Amount of Each Disbursement this Period 50.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Daniel Ortega		Transaction ID: 30b-21-05526-05526 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 47 Reilly Court		Amount of Each Disbursement this Period 50.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Daniel Ortega		Transaction ID: 30b-21-05527-05527 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 47 Reilly Court		Amount of Each Disbursement this Period 50.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel Ortega		Transaction ID: 30b-21-05528-05528 Date of Disbursement 11 / 07 / 2006	
Mailing Address 47 Reilly Court		Amount of Each Disbursement this Period 50.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Daniel Ortega		Transaction ID: 30b-21-05529-05529 Date of Disbursement 11 / 07 / 2006	
Mailing Address 47 Reilly Court		Amount of Each Disbursement this Period 50.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Daniel Ortega		Transaction ID: 30b-21-05530-05530 Date of Disbursement 11 / 07 / 2006	
Mailing Address 47 Reilly Court		Amount of Each Disbursement this Period 50.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	150.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel Ortega		Transaction ID: 30b-21-05538-05538 Date of Disbursement 11 / 07 / 2006	
Mailing Address 47 Reilly Court		Amount of Each Disbursement this Period 50.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05542-05542 Date of Disbursement 11 / 07 / 2006	
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00	
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05543-05543 Date of Disbursement 11 / 07 / 2006	
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00	
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05544-05544 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05545-05545 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05546-05546 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Adam Silverstein		Transaction ID: 30b-21-05547-05547 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Adam Silverstein		Transaction ID: 30b-21-05548-05548 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Adam Silverstein		Transaction ID: 30b-21-05549-05549 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05550-05550 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05551-05551 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05552-05552 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	150.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05553-05553 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05554-05554 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05555-05555 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05556-05556 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05557-05557 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05558-05558 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Adam Silverstein		Transaction ID: 30b-21-05559-05559 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period <input type="text" value="50.00"/>
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name <input type="text"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Adam Silverstein		Transaction ID: 30b-21-05560-05560 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period <input type="text" value="50.00"/>
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name <input type="text"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Adam Silverstein		Transaction ID: 30b-21-05561-05561 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period <input type="text" value="50.00"/>
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name <input type="text"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05562-05562 Date of Disbursement 11 / 07 / 2006
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Ace F. Laluces		Transaction ID: 30b-21-05563-05563 Date of Disbursement 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Ace F. Laluces		Transaction ID: 30b-21-05564-05564 Date of Disbursement 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	150.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ace F. Laluces		Transaction ID: 30b-21-05565-05565 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ace F. Laluces		Transaction ID: 30b-21-05566-05566 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ace F. Laluces		Transaction ID: 30b-21-05567-05567 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ace F. Laluces		Transaction ID: 30b-21-05568-05568 Date of Disbursement 11 / 07 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Ace F. Laluces		Transaction ID: 30b-21-05569-05569 Date of Disbursement 11 / 07 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Ace F. Laluces		Transaction ID: 30b-21-05570-05570 Date of Disbursement 11 / 07 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 879 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ace F. Laluces		Transaction ID: 30b-21-05571-05571 Date of Disbursement 11 / 07 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ace F. Laluces		Transaction ID: 30b-21-05572-05572 Date of Disbursement 11 / 07 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ace F. Laluces		Transaction ID: 30b-21-05573-05573 Date of Disbursement 11 / 07 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-21-05574-05574
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-21-05577-05577
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-21-05578-05578
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 881 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-21-05579-05579
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-21-05580-05580
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-21-05582-05582
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-21-05583-05583
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-21-05585-05585
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-21-05586-05586
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 883 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-21-05587-05587
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-21-05588-05588
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-21-05589-05589
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses		Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-21-05590-05590 Date of Disbursement
Mailing Address 332 Route 46 West		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	<input type="text" value="50.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-21-05591-05591 Date of Disbursement
Mailing Address 332 Route 46 West		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	<input type="text" value="50.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-21-05592-05592 Date of Disbursement
Mailing Address 332 Route 46 West		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	<input type="text" value="50.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 885 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-21-05593-05593 Date of Disbursement
Mailing Address 332 Route 46 West		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	<input type="text" value="50.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-21-05594-05594 Date of Disbursement
Mailing Address 332 Route 46 West		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	<input type="text" value="50.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-21-05595-05595 Date of Disbursement
Mailing Address 332 Route 46 West		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	<input type="text" value="50.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Avis Rent A Car		Transaction ID: 30b-21-05596-05596
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Rent A Car		Transaction ID: 30b-21-05597-05597
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Avis Rent A Car		Transaction ID: 30b-21-05598-05598
Mailing Address 332 Route 46 West		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Little Ferry	State NJ	Zip Code
Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05599-05599 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05600-05600 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05601-05601 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05602-05602 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05603-05603 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05604-05604 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05605-05605 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05606-05606 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05607-05607 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05608-05608 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05609-05609 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05610-05610 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05611-05611 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05612-05612 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05613-05613 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05614-05614 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05615-05615 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05616-05616 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05617-05617 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05618-05618 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05619-05619 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05620-05620 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05621-05621 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05622-05622 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05623-05623 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05624-05624 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05625-05625 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05626-05626 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05627-05627 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05628-05628 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05629-05629 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05630-05630 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05631-05631 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05632-05632 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05633-05633 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05634-05634 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 899 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05635-05635 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05636-05636 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05637-05637 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05638-05638 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05639-05639 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05640-05640 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 901 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05641-05641 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05642-05642 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05643-05643 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05644-05644 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05645-05645 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05646-05646 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 903 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05647-05647 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05648-05648 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05649-05649 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 904 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05650-05650 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05651-05651 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05652-05652 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 905 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05653-05653 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05654-05654 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05655-05655 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 906 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05656-05656 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05657-05657 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05658-05658 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 907 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05659-05659 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05660-05660 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05661-05661 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05662-05662 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05663-05663 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05664-05664 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 909 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05665-05665 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05667-05667 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05668-05668 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 910 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05669-05669 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05670-05670 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05672-05672 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05673-05673 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05674-05674 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05675-05675 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05676-05676 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Keith C Carbone		Transaction ID: 30b-21-05677-05677 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05678-05678 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Silverstein		Transaction ID: 30b-21-05679-05679 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05680-05680 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-21-05681-05681 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	150.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05684-05684 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05685-05685 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05687-05687 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05688-05688 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Piccola Roma		Transaction ID: 30b-21-05689-05689 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Piccola Roma		Transaction ID: 30b-21-05690-05690 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Piccola Roma		Transaction ID: 30b-21-05691-05691 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Washington Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Adam Silverstein		Transaction ID: 30b-21-05692-05692 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 50.00
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-21-05693-05693 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keith C Carbone		Transaction ID: 30b-21-05694-05694 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Keith C Carbone		Transaction ID: 30b-21-05695-05695 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-21-05696-05696 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ace F. Laluces		Transaction ID: 30b-21-05697-05697 Date of Disbursement 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ace F. Laluces		Transaction ID: 30b-21-05698-05698 Date of Disbursement 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ace F. Laluces		Transaction ID: 30b-21-05699-05699 Date of Disbursement 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ace F. Laluces		Transaction ID: 30b-21-05700-05700 Date of Disbursement 11 / 07 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ace F. Laluces		Transaction ID: 30b-21-05701-05701 Date of Disbursement 11 / 07 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lauren Zyriek		Transaction ID: 30b-21-05704-05704 Date of Disbursement 11 / 07 / 2006	
Mailing Address 140 Propsect Avenue		Amount of Each Disbursement this Period 50.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jaclyn Grillo		Transaction ID: 30b-21-05707-05707 Date of Disbursement 11 / 07 / 2006	
Mailing Address 444 North Midland R1		Amount of Each Disbursement this Period 50.00	
City Saddle Brook State NJ Zip Code 07663	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jaclyn Grillo		Transaction ID: 30b-21-05708-05708 Date of Disbursement 11 / 07 / 2006	
Mailing Address 444 North Midland R1		Amount of Each Disbursement this Period 50.00	
City Saddle Brook State NJ Zip Code 07663	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jaclyn Grillo		Transaction ID: 30b-21-05709-05709 Date of Disbursement 11 / 07 / 2006	
Mailing Address 444 North Midland R1		Amount of Each Disbursement this Period 50.00	
City Saddle Brook State NJ Zip Code 07663	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Jaclyn Grillo</p>		<p>Transaction ID: 30b-21-05710-05710 Date of Disbursement</p>	
<p>Mailing Address 444 North Midland R1</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City Saddle Brook State NJ Zip Code 07663</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Jaclyn Grillo</p>		<p>Transaction ID: 30b-21-05711-05711 Date of Disbursement</p>	
<p>Mailing Address 444 North Midland R1</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City Saddle Brook State NJ Zip Code 07663</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Jaclyn Grillo</p>		<p>Transaction ID: 30b-21-05712-05712 Date of Disbursement</p>	
<p>Mailing Address 444 North Midland R1</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City Saddle Brook State NJ Zip Code 07663</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jaclyn Grillo Full Name (Last, First, Middle Initial) Mailing Address 444 North Midland R1 City Saddle Brook State NJ Zip Code 07663 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05713-05713 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Jaclyn Grillo Full Name (Last, First, Middle Initial) Mailing Address 444 North Midland R1 City Saddle Brook State NJ Zip Code 07663 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05716-05716 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
--	--	--

C. Jaclyn Grillo Full Name (Last, First, Middle Initial) Mailing Address 444 North Midland R1 City Saddle Brook State NJ Zip Code 07663 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05718-05718 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Enrico Domingo		Transaction ID: 30b-21-05720-05720 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2139 Van Buren Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Enrico Domingo		Transaction ID: 30b-21-05721-05721 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2139 Van Buren Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Enrico Domingo		Transaction ID: 30b-21-05722-05722 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2139 Van Buren Place		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Enrico Domingo		Transaction ID: 30b-21-05723-05723 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2139 Van Buren Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Enrico Domingo		Transaction ID: 30b-21-05724-05724 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2139 Van Buren Place		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. John Fede		Transaction ID: 30b-21-05725-05725 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 300 Miller Avenue		Amount of Each Disbursement this Period 50.00
City Elmwood Park State NJ Zip Code 07407	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Teddy Weirman		Transaction ID: 30b-21-05732-05732 Date of Disbursement 11 / 07 / 2006
Mailing Address 280 Prospect 6 - 0		Amount of Each Disbursement this Period 50.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Quiana Gleaves		Transaction ID: 30b-21-05757-05757 Date of Disbursement 11 / 07 / 2006
Mailing Address 19 Ronald Drive		Amount of Each Disbursement this Period 50.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Darlene Gleaves		Transaction ID: 30b-21-05758-05758 Date of Disbursement 11 / 07 / 2006
Mailing Address 19 Ronald Drive		Amount of Each Disbursement this Period 50.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marques Hayes		Transaction ID: 30b-21-05764-05764 Date of Disbursement 11 / 07 / 2006
Mailing Address 53 Melville Lane		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Greg Ackles		Transaction ID: 30b-21-05779-05779 Date of Disbursement 11 / 07 / 2006
Mailing Address 108 Wall Street		Amount of Each Disbursement this Period 50.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Threasa Ackles-Cope		Transaction ID: 30b-21-05780-05780 Date of Disbursement 11 / 07 / 2006
Mailing Address 110 Wall Street		Amount of Each Disbursement this Period 50.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Margo D. Thomas		Transaction ID: 30b-21-05783-05783 Date of Disbursement 11 / 07 / 2006
Mailing Address 400 High Street #402		Amount of Each Disbursement this Period 50.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Shawn Landers		Transaction ID: 30b-21-05784-05784 Date of Disbursement 11 / 07 / 2006
Mailing Address 32 Bonnie Lane		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Maurice Anderson		Transaction ID: 30b-21-05786-05786 Date of Disbursement 11 / 07 / 2006
Mailing Address 39 Country Club		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mikole Burke-Anderson		Transaction ID: 30b-21-05787-05787 Date of Disbursement 11 / 07 / 2006
Mailing Address 39 Country Club		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Joel Romulus		Transaction ID: 30b-21-05791-05791 Date of Disbursement 11 / 07 / 2006
Mailing Address 27 Bonnie Lane		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Earl Johnson		Transaction ID: 30b-21-05795-05795 Date of Disbursement 11 / 07 / 2006
Mailing Address 38 Gramercy Lane		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ravon McCurry		Transaction ID: 30b-21-05809-05809 Date of Disbursement 11 / 07 / 2006	
Mailing Address 110 Stacey Court		Amount of Each Disbursement this Period 50.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Robert Thomas		Transaction ID: 30b-21-05814-05814 Date of Disbursement 11 / 07 / 2006	
Mailing Address 400 High Street #402		Amount of Each Disbursement this Period 50.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Beverly Ackles		Transaction ID: 30b-21-05820-05820 Date of Disbursement 11 / 07 / 2006	
Mailing Address 108 Wall Street		Amount of Each Disbursement this Period 50.00	
City Burlington State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. William Moss		Transaction ID: 30b-21-05828-05828 Date of Disbursement 11 / 07 / 2006
Mailing Address 39 Country Club Road		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Monica Moss		Transaction ID: 30b-21-05829-05829 Date of Disbursement 11 / 07 / 2006
Mailing Address 39 Country Club Road		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Monifa Moore		Transaction ID: 30b-21-05830-05830 Date of Disbursement 11 / 07 / 2006
Mailing Address 19 Joel Court		Amount of Each Disbursement this Period 50.00
City Lindenwalled State NJ Zip Code 08201	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joann Warner Full Name (Last, First, Middle Initial) Mailing Address 19 Joel Court City Lindenwold State NJ Zip Code 08021 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05832-05832 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Elsie Albone Full Name (Last, First, Middle Initial) Mailing Address 880 Kearsley Road City Sicklerville State NJ Zip Code 08081 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05849-05849 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Kevin Badie Full Name (Last, First, Middle Initial) Mailing Address 520 Colligs Avenue City Collingswood State NJ Zip Code 08108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05850-05850 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cristina DeLeon		Transaction ID: 30b-21-05856-05856 Date of Disbursement 11 / 07 / 2006	
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 50.00	
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Connie DeLeon		Transaction ID: 30b-21-05857-05857 Date of Disbursement 11 / 07 / 2006	
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 50.00	
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kristen DiVenti		Transaction ID: 30b-21-05858-05858 Date of Disbursement 11 / 07 / 2006	
Mailing Address 33 Natur Lane		Amount of Each Disbursement this Period 50.00	
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. David Keller		Transaction ID: 30b-21-05867-05867 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1 Hoot Owl Drive		Amount of Each Disbursement this Period 50.00	
City Sicklerville State NJ Zip Code 08081	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kimberly Kern		Transaction ID: 30b-21-05868-05868 Date of Disbursement 11 / 07 / 2006	
Mailing Address 615 Walnut Avenue		Amount of Each Disbursement this Period 50.00	
City Laurel Springs State NJ Zip Code 08021	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Timothy Kravitz		Transaction ID: 30b-21-05869-05869 Date of Disbursement 11 / 07 / 2006	
Mailing Address 500 Columbia Avenue		Amount of Each Disbursement this Period 50.00	
City Pitman State NJ Zip Code 08071	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Zinnia Sharpe		Transaction ID: 30b-21-05875-05875 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 535 MacKinet Way		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Eric Wachter		Transaction ID: 30b-21-05882-05882 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 19 East Broad Street Apt B		Amount of Each Disbursement this Period 50.00
City Palmyra State NJ Zip Code 08065	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Daniel Wright		Transaction ID: 30b-21-05884-05884 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 862 Longwood Circle		Amount of Each Disbursement this Period 50.00
City Haddonfield State NJ Zip Code 08033	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Bernadette Williams Full Name (Last, First, Middle Initial) Mailing Address 1118 Lake Shore Drive City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05921-05921 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Thelma Coles Full Name (Last, First, Middle Initial) Mailing Address 1278 Lakeshore Drive City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05925-05925 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Vardalareise Green Full Name (Last, First, Middle Initial) Mailing Address 110 Columbia Drive City Atco State NJ Zip Code 08004 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05926-05926 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Denise Baskerville		Transaction ID: 30b-21-05927-05927 Date of Disbursement 11 / 07 / 2006	
Mailing Address A-10 Chestnut Avenue		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Linda Crisdon		Transaction ID: 30b-21-05928-05928 Date of Disbursement 11 / 07 / 2006	
Mailing Address 500 North 7th Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ashleen Lopez		Transaction ID: 30b-21-05932-05932 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1244 Browning Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Janeen Williams Full Name (Last, First, Middle Initial) Mailing Address 1066 Lake Shore Drive City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05933-05933 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Patricia Williams Full Name (Last, First, Middle Initial) Mailing Address 44 Branch Village City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05941-05941 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Renee Bryant Full Name (Last, First, Middle Initial) Mailing Address 1217 South Octagon Road City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-05946-05946 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alanna Browne		Transaction ID: 30b-21-05952-05952 Date of Disbursement 11 / 07 / 2006	
Mailing Address 118 South Chester Avenue		Amount of Each Disbursement this Period 50.00	
City Pleasantville State NJ Zip Code 08232	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Isreal Laguer		Transaction ID: 30b-21-05969-05969 Date of Disbursement 11 / 07 / 2006	
Mailing Address 635 Vine Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Isreal Laguer		Transaction ID: 30b-21-05986-05986 Date of Disbursement 11 / 07 / 2006	
Mailing Address 635 Vine Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kamile Kuntz		Transaction ID: 30b-21-05988-05988 Date of Disbursement 11 / 07 / 2006	
Mailing Address 408 Chambers Avenue		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Kamile Kuntz		Transaction ID: 30b-21-05989-05989 Date of Disbursement 11 / 07 / 2006	
Mailing Address 408 Chambers Avenue		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Alanna Browne		Transaction ID: 30b-21-05991-05991 Date of Disbursement 11 / 07 / 2006	
Mailing Address 118 South Chester Avenue		Amount of Each Disbursement this Period 50.00	
City Pleasantville State NJ Zip Code 08232	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Walker		Transaction ID: 30b-21-05992-05992 Date of Disbursement 11 / 07 / 2006	
Mailing Address 102 Holly Street		Amount of Each Disbursement this Period 50.00	
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Angel Alamo		Transaction ID: 30b-21-06006-06006 Date of Disbursement 11 / 07 / 2006	
Mailing Address 891 North 27th Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Johanie Jean-Louis		Transaction ID: 30b-21-06046-06046 Date of Disbursement 11 / 07 / 2006	
Mailing Address 35 Birch Street		Amount of Each Disbursement this Period 65.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	165.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 941 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Martin		Transaction ID: 30b-21-06059-06059 Date of Disbursement 11 / 07 / 2006	
Mailing Address P.O. Box 74		Amount of Each Disbursement this Period 65.00	
City Orange	State NJ	Zip Code 07050	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jenna Scheps		Transaction ID: 30b-21-06060-06060 Date of Disbursement 11 / 07 / 2006	
Mailing Address 9 Valley Way		Amount of Each Disbursement this Period 65.00	
City West Orange	State NJ	Zip Code 07052	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Louis Antenor		Transaction ID: 30b-21-06062-06062 Date of Disbursement 11 / 07 / 2006	
Mailing Address 46 Lorelei Road		Amount of Each Disbursement this Period 65.00	
City West Orange	State NJ	Zip Code 07052	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Rollins		Transaction ID: 30b-21-06065-06065 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lawana Rollins		Transaction ID: 30b-21-06066-06066 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hassan Abdul-Rasheed		Transaction ID: 30b-21-06076-06076 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 259 Reynolds Terrace		Amount of Each Disbursement this Period 65.00
City Orange State NJ Zip Code 07050		
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rodney Holman		Transaction ID: 30b-21-06078-06078 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Terry Tucker		Transaction ID: 30b-21-06083-06083 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3001 South Grove Street		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Krystal Bradshaw		Transaction ID: 30b-21-06084-06084 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 216 Rhode Island Avenue 2nd Floor		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Theresa Combs		Transaction ID: 30b-21-06085-06085 Date of Disbursement 11 / 07 / 2006
Mailing Address 164 South Harrison Street		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Marvin Goodson		Transaction ID: 30b-21-06090-06090 Date of Disbursement 11 / 07 / 2006
Mailing Address 540 Park Avenue Apt. 12		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lonnie Hughes		Transaction ID: 30b-21-06091-06091 Date of Disbursement 11 / 07 / 2006
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daphne Williams		Transaction ID: 30b-21-06092-06092 Date of Disbursement 11 / 07 / 2006	
Mailing Address 389 North Maple Avenue		Amount of Each Disbursement this Period 65.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Charles Martin		Transaction ID: 30b-21-06108-06108 Date of Disbursement 11 / 07 / 2006	
Mailing Address P.O. Box 74		Amount of Each Disbursement this Period 65.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Debbie Walker		Transaction ID: 30b-21-06109-06109 Date of Disbursement 11 / 07 / 2006	
Mailing Address 226 Rennen Avenue		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Lorenzo Hall		Transaction ID: 30b-21-06110-06110 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 209 Williams Street		Amount of Each Disbursement this Period 65.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Tim Sporic		Transaction ID: 30b-21-06111-06111 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 South Orange Avenue		Amount of Each Disbursement this Period 65.00
City South Orange State NJ Zip Code 07079	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Martha Abraham		Transaction ID: 30b-21-06112-06112 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 295 Woodside Avenue		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Stephen Wisner		Transaction ID: 30b-21-06120-06120 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 25 North Terrace		Amount of Each Disbursement this Period 65.00
City State Zip Code Maplewood NJ 07040	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Adrianna Rockford		Transaction ID: 30b-21-06130-06130 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 112 Ray Street		Amount of Each Disbursement this Period 65.00
City State Zip Code Garfield NJ 07026	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Malik James		Transaction ID: 30b-21-06141-06141 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Schulyer Avenue 3rd Floor		Amount of Each Disbursement this Period 65.00
City State Zip Code Newark NJ 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Darne Williams		Transaction ID: 30b-21-06146-06146 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 269 Clinton Place		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Taili Brookins		Transaction ID: 30b-21-06147-06147 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 269 Clinton Place		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Shaeed Epps		Transaction ID: 30b-21-06148-06148 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 187 A Pershine Avenue		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jeran Crawford		Transaction ID: 30b-21-06150-06150 Date of Disbursement 11 / 07 / 2006
Mailing Address 268 Clinton Place		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kasib Goode		Transaction ID: 30b-21-06153-06153 Date of Disbursement 11 / 07 / 2006
Mailing Address 20 Schulyer Avenue 3rd Floor		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Joyce Arnold		Transaction ID: 30b-21-06154-06154 Date of Disbursement 11 / 07 / 2006
Mailing Address 298 South 18th Street		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aishah Abdul-Hakim		Transaction ID: 30b-21-06155-06155 Date of Disbursement 11 / 07 / 2006
Mailing Address 97 Woodbine Avenue		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jeffery Logan		Transaction ID: 30b-21-06164-06164 Date of Disbursement 11 / 07 / 2006
Mailing Address 265 West End Avenue		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. John Roulhac		Transaction ID: 30b-21-06166-06166 Date of Disbursement 11 / 07 / 2006
Mailing Address 347 Chapman Street		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Calvin Smiley		Transaction ID: 30b-21-06167-06167 Date of Disbursement 11 / 07 / 2006	
Mailing Address 282 South 6th Street		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James Blaney		Transaction ID: 30b-21-06170-06170 Date of Disbursement 11 / 07 / 2006	
Mailing Address 173 Dickerson Street		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Milton Duran		Transaction ID: 30b-21-06172-06172 Date of Disbursement 11 / 07 / 2006	
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. John Patino		Transaction ID: 30b-21-06173-06173 Date of Disbursement 11 / 07 / 2006	
Mailing Address 641 North 9th Street		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Lillie Nash		Transaction ID: 30b-21-06174-06174 Date of Disbursement 11 / 07 / 2006	
Mailing Address 624 Nye Avenue		Amount of Each Disbursement this Period 65.00	
City Irvington State NJ Zip Code 71111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Victor Parker		Transaction ID: 30b-21-06185-06185 Date of Disbursement 11 / 07 / 2006	
Mailing Address 466 Avon Avenue, 3rd Fl.		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kevin Butler Full Name (Last, First, Middle Initial) Mailing Address 353 Leslie Street City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06187-06187 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 65.00 Category/Type
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B. Elaine Beasley Full Name (Last, First, Middle Initial) Mailing Address 97 Court Street City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06189-06189 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 65.00 Category/Type
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C. Lisa Scott Full Name (Last, First, Middle Initial) Mailing Address 57 Martha Court City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06191-06191 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 65.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lisa Scott		Transaction ID: 30b-21-06192-06192 Date of Disbursement 11 / 07 / 2006	
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lisa Scott		Transaction ID: 30b-21-06193-06193 Date of Disbursement 11 / 07 / 2006	
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lisa Scott		Transaction ID: 30b-21-06194-06194 Date of Disbursement 11 / 07 / 2006	
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lisa Scott Full Name (Last, First, Middle Initial) Mailing Address 57 Martha Court City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06195-06195 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 65.00 Category/Type
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B. Bruce Simpson Full Name (Last, First, Middle Initial) Mailing Address 72 Wolcott Terrace City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06201-06201 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 65.00 Category/Type
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C. Charles Martin Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 74 City Orange State NJ Zip Code 07050 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06203-06203 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 65.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Martin		Transaction ID: 30b-21-06204-06204 Date of Disbursement 11 / 07 / 2006
Mailing Address P.O. Box 74		Amount of Each Disbursement this Period 65.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lisa Scott		Transaction ID: 30b-21-06206-06206 Date of Disbursement 11 / 07 / 2006
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lisa Scott		Transaction ID: 30b-21-06207-06207 Date of Disbursement 11 / 07 / 2006
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lisa Scott		Transaction ID: 30b-21-06208-06208 Date of Disbursement 11 / 07 / 2006	
Mailing Address 57 Martha Court		Amount of Each Disbursement this Period 65.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kendra Taliaferro		Transaction ID: 30b-21-06284-06284 Date of Disbursement 11 / 07 / 2006	
Mailing Address 59 Westcott Street		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dante Rollins		Transaction ID: 30b-21-06287-06287 Date of Disbursement 11 / 07 / 2006	
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	185.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tamel Saunders		Transaction ID: 30b-21-06289-06289 Date of Disbursement 11 / 07 / 2006
Mailing Address 15 Isabelle Avenue 2nd Floor		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07016	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Iman Coachman		Transaction ID: 30b-21-06294-06294 Date of Disbursement 11 / 07 / 2006
Mailing Address 17-39 Lincoln Street Apt. 405		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07108	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ibrahim Small		Transaction ID: 30b-21-06297-06297 Date of Disbursement 11 / 07 / 2006
Mailing Address 88 Fairmount Terrace		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07018	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Danielle Wright		Transaction ID: 30b-21-06307-06307 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 471 North Maple Avenue		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Nancy Kidd		Transaction ID: 30b-21-06312-06312 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 154 Park Street		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sherel Johnson		Transaction ID: 30b-21-06314-06314 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 276 Amherst Street 1st Floor		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gerald Murphy		Transaction ID: 30b-21-06316-06316 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 130 Shephard Avenue		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Vernon Bradshaw		Transaction ID: 30b-21-06326-06326 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 44 Linwood Place		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07107		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lonnie Hughes		Transaction ID: 30b-21-06328-06328 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clavon Browning		Transaction ID: 30b-21-06334-06334 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 523 Prospect Street, Apt #9		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Derek Combs		Transaction ID: 30b-21-06335-06335 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 164 South Harrison Street		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Quan Miller		Transaction ID: 30b-21-06338-06338 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 259 Reynolds Terrace, Apt#B7		Amount of Each Disbursement this Period 60.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Desirea Carr		Transaction ID: 30b-21-06342-06342 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 43 East Park Street Apt 23		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Linda King		Transaction ID: 30b-21-06343-06343 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 97 Willowdale Avenue		Amount of Each Disbursement this Period 60.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Taniquah Holman		Transaction ID: 30b-21-06392-06392 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Leroy Daniels		Transaction ID: 30b-21-06398-06398 Date of Disbursement 11 / 07 / 2006	
Mailing Address 448 Main Street		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joshua Baker		Transaction ID: 30b-21-06402-06402 Date of Disbursement 11 / 07 / 2006	
Mailing Address 27 Beech Street		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Johnny Goodson		Transaction ID: 30b-21-06403-06403 Date of Disbursement 11 / 07 / 2006	
Mailing Address 540 Park Avenue Apt 12		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Slater		Transaction ID: 30b-21-06407-06407 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 268 Prospect Street Apt 2F		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ashley Swanson		Transaction ID: 30b-21-06416-06416 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3001 South Grove Street		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Alexis Swanson		Transaction ID: 30b-21-06420-06420 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3001 South Grove Street		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Wilma Leslie		Transaction ID: 30b-21-06440-06440 Date of Disbursement 11 / 07 / 2006	
Mailing Address 28 Street. Paul Avenue		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mike Copeland		Transaction ID: 30b-21-06441-06441 Date of Disbursement 11 / 07 / 2006	
Mailing Address 210 Richelieu Terrace		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rosie Wilder		Transaction ID: 30b-21-06442-06442 Date of Disbursement 11 / 07 / 2006	
Mailing Address 469 Elizabeth Avenue		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alice Randle		Transaction ID: 30b-21-06445-06445 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 65-B Irvine Turner Boulevard		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Danny Moore Jr		Transaction ID: 30b-21-06446-06446 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2-12 Hillside Avenue 104		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Renee Covington		Transaction ID: 30b-21-06447-06447 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 279 Ridgewood Avenue		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Darlene Davis		Transaction ID: 30b-21-06448-06448 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 177 James Street Apt 2A		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Antonio Santana		Transaction ID: 30b-21-06451-06451 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 300 Woodside Avenue		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Melina P. Moreno		Transaction ID: 30b-21-06453-06453 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 498 N. 4th Street		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ivette Robles Full Name (Last, First, Middle Initial) Mailing Address 266 Parker Street City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06456-06456 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Jose Lamour Full Name (Last, First, Middle Initial) Mailing Address 3 Summer Place City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06457-06457 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Luis Casanova Full Name (Last, First, Middle Initial) Mailing Address 74 Kearney Street City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06458-06458 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ashley Romero		Transaction ID: 30b-21-06460-06460 Date of Disbursement 11 / 07 / 2006	
Mailing Address 73 Bellair Place		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Stephen Maisonave		Transaction ID: 30b-21-06461-06461 Date of Disbursement 11 / 07 / 2006	
Mailing Address 107 N. 10th Street		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jose Ortiz		Transaction ID: 30b-21-06462-06462 Date of Disbursement 11 / 07 / 2006	
Mailing Address 127 N. 15th Street		Amount of Each Disbursement this Period 60.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melissa Polanco		Transaction ID: 30b-21-06463-06463 Date of Disbursement 11 / 07 / 2006	
Mailing Address 243 Broad Street		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rafael Concepcion, Jr.		Transaction ID: 30b-21-06464-06464 Date of Disbursement 11 / 07 / 2006	
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Khalif Ball		Transaction ID: 30b-21-06465-06465 Date of Disbursement 11 / 07 / 2006	
Mailing Address 148 Tuxedo Parkway		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Javier Morales Full Name (Last, First, Middle Initial) Mailing Address 40 West Kinney Street City Newark State NJ Zip Code 07102 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06467-06467 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Victor Brantley Full Name (Last, First, Middle Initial) Mailing Address 221 North 6th Street City Newark State NJ Zip Code 07107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06472-06472 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Richard Williams Full Name (Last, First, Middle Initial) Mailing Address 162 Muhammad Ali Avenue City Newark State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06483-06483 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stanley Willis		Transaction ID: 30b-21-06485-06485 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 495 Bergen Street		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Philip Baskerville		Transaction ID: 30b-21-06488-06488 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 33 Netherwood Place		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Olivette Willis		Transaction ID: 30b-21-06490-06490 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 495 Bergen Street		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Irvin Robinson		Transaction ID: 30b-21-06491-06491 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1 Grumman Avenue Apt 2A		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Timothy O'donnell		Transaction ID: 30b-21-06497-06497 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 South Orange Avenue		Amount of Each Disbursement this Period 60.00
City South Orange State NJ Zip Code 07079	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Joyce Quijano		Transaction ID: 30b-21-06500-06500 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 38 Ravine Avenue		Amount of Each Disbursement this Period 60.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Darlene Cooper		Transaction ID: 30b-21-06516-06516 Date of Disbursement 11 / 07 / 2006
Mailing Address 11 Carey Court		Amount of Each Disbursement this Period 60.00
City Montclair	State NJ	
Zip Code 07042		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Anibal Alcantara		Transaction ID: 30b-21-06517-06517 Date of Disbursement 11 / 07 / 2006
Mailing Address 15 Heller Parkway		Amount of Each Disbursement this Period 60.00
City Newark	State NJ	
Zip Code 07104		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. Farhan Kamal		Transaction ID: 30b-21-06519-06519 Date of Disbursement 11 / 07 / 2006
Mailing Address 196 Harrison Avenue		Amount of Each Disbursement this Period 60.00
City Harrison	State NJ	
Zip Code 07029		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cory Crawford		Transaction ID: 30b-21-06521-06521 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 276 Clinton Place		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Dawn Asberry		Transaction ID: 30b-21-06525-06525 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 284 Leslie Street		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Michael Jacobson		Transaction ID: 30b-21-06528-06528 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 South Orange Ave		Amount of Each Disbursement this Period 60.00
City South Orange State NJ Zip Code 07079	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kashif Jones Full Name (Last, First, Middle Initial) Mailing Address 58 Hedden Terrace City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06535-06535 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Cornelius Cohen Full Name (Last, First, Middle Initial) Mailing Address 31 Hedden Terrace City Newark State NJ Zip Code 07106 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06543-06543 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Shameek Silvers Full Name (Last, First, Middle Initial) Mailing Address 44 Palm Street 1st Floor City Newark State NJ Zip Code 07106 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06544-06544 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Devon Horton		Transaction ID: 30b-21-06548-06548 Date of Disbursement 11 / 07 / 2006
Mailing Address 75-95 Clinton Avenue Apt 12F		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Thomas Kiernan		Transaction ID: 30b-21-06550-06550 Date of Disbursement 11 / 07 / 2006
Mailing Address 9 Madison Ave, Apartment 6		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Khalif Bowles		Transaction ID: 30b-21-06552-06552 Date of Disbursement 11 / 07 / 2006
Mailing Address 18 South 17 Street 2nd Floor		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shana Manning		Transaction ID: 30b-21-06553-06553 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 138 Mount Vernon Place Apt 1		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Elizabeth Powell		Transaction ID: 30b-21-06554-06554 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 125 Weequahic Avenue		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Debra Horton		Transaction ID: 30b-21-06566-06566 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Hilltop Place		Amount of Each Disbursement this Period 60.00
City Montclair State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Olajawan Hasbin Full Name (Last, First, Middle Initial) Mailing Address 18 South 17th Street City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06568-06568 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Jessie James Full Name (Last, First, Middle Initial) Mailing Address 6 Seymore Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06570-06570 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Wade Borns Full Name (Last, First, Middle Initial) Mailing Address 37 Shanley Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06572-06572 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dorothea Powell		Transaction ID: 30b-21-06573-06573 Date of Disbursement 11 / 07 / 2006	
Mailing Address 125 Weequahic Avenue		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Quadira Smith		Transaction ID: 30b-21-06575-06575 Date of Disbursement 11 / 07 / 2006	
Mailing Address 57 Marth Street		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tanisha Manning		Transaction ID: 30b-21-06581-06581 Date of Disbursement 11 / 07 / 2006	
Mailing Address 139 Mt. Vernon Place		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jason Smiley		Transaction ID: 30b-21-06582-06582 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 138 Elmwood Avenue		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) LaCreashia Boyd		Transaction ID: 30b-21-06589-06589 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 308 South 10th Street		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07103		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Annette Lampkin		Transaction ID: 30b-21-06591-06591 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 276 Lehigh Avenue		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07112		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Markita Coley		Transaction ID: 30b-21-06592-06592 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 147 Keer Avenue		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Shaydeese Coley-Hughes		Transaction ID: 30b-21-06593-06593 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 147 Keer Avenue		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ebony Barton		Transaction ID: 30b-21-06596-06596 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 275 Prospect Street Apt 4C		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Roslyn Lai Full Name (Last, First, Middle Initial) Mailing Address 275 Prospect Street Apt 4C City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06597-06597 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Nikkia Neal Full Name (Last, First, Middle Initial) Mailing Address 12 Marsac Place City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06625-06625 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Nicole Neal Full Name (Last, First, Middle Initial) Mailing Address 12 Marsac Place City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06626-06626 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Scotty Ansong		Transaction ID: 30b-21-06639-06639 Date of Disbursement 11 / 07 / 2006	
Mailing Address 131 Washington Street		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anthony Wiltshire		Transaction ID: 30b-21-06640-06640 Date of Disbursement 11 / 07 / 2006	
Mailing Address 128 Hillyer Street		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sergio Carrero		Transaction ID: 30b-21-06641-06641 Date of Disbursement 11 / 07 / 2006	
Mailing Address 228 Boyle Avenue		Amount of Each Disbursement this Period 60.00	
City Totowa State NJ Zip Code 07512	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alex Stein		Transaction ID: 30b-21-06652-06652 Date of Disbursement 11 / 07 / 2006	
Mailing Address 40 Godfrey Road		Amount of Each Disbursement this Period 60.00	
City Montclair State NJ Zip Code 07043	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rick Pierre-Philipp		Transaction ID: 30b-21-06657-06657 Date of Disbursement 11 / 07 / 2006	
Mailing Address 152 South Valley Road		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jesse Diaz		Transaction ID: 30b-21-06661-06661 Date of Disbursement 11 / 07 / 2006	
Mailing Address 10 Waldo Avenue #1		Amount of Each Disbursement this Period 60.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. George Carrero		Transaction ID: 30b-21-06662-06662 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 26 Ella Street		Amount of Each Disbursement this Period 60.00
City Bloomfield State NJ Zip Code 07003		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Joaner Napoleon		Transaction ID: 30b-21-06663-06663 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 35 Watssesing Avenue		Amount of Each Disbursement this Period 60.00
City Bloomfield State NJ Zip Code 07003		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jean Napoleon		Transaction ID: 30b-21-06664-06664 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 35 Watssesing Avenue		Amount of Each Disbursement this Period 60.00
City Bloomfield State NJ Zip Code 07003		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Syieda Ellison		Transaction ID: 30b-21-06665-06665 Date of Disbursement 11 / 07 / 2006	
Mailing Address 573 Morris Street		Amount of Each Disbursement this Period 60.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jasmine Thurmond		Transaction ID: 30b-21-06666-06666 Date of Disbursement 11 / 07 / 2006	
Mailing Address 573 Morris Street		Amount of Each Disbursement this Period 60.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Alaji Ali		Transaction ID: 30b-21-06667-06667 Date of Disbursement 11 / 07 / 2006	
Mailing Address 142 Main Street Apt. 1		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angelica Burton		Transaction ID: 30b-21-06668-06668 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 26 Kling Street		Amount of Each Disbursement this Period 60.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Beatrice Gonzalez		Transaction ID: 30b-21-06674-06674 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 203 Watchung Avenue Apt 2		Amount of Each Disbursement this Period 60.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Asia Stanislaus		Transaction ID: 30b-21-06675-06675 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 58 Terrace Avenue		Amount of Each Disbursement this Period 60.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sarah Wesley		Transaction ID: 30b-21-06676-06676 Date of Disbursement 11 / 07 / 2006	
Mailing Address 9 Valley Way		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Naomi Gonzalez		Transaction ID: 30b-21-06677-06677 Date of Disbursement 11 / 07 / 2006	
Mailing Address 203 Watchung Avenue		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Esqueree		Transaction ID: 30b-21-06682-06682 Date of Disbursement 11 / 07 / 2006	
Mailing Address 181 Mitchell Street		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Claudeen Benoit</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 10 North Kowain Place</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-21-06700-06700</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Dharryl Laurente</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 72 Kirk Street</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-21-06701-06701</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Danielle Elizaire</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 86 Ridge Avenue</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-21-06705-06705</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="180.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michelle Sydney		Transaction ID: 30b-21-06710-06710 Date of Disbursement 11 / 07 / 2006	
Mailing Address 17 Dodd Street Avenue		Amount of Each Disbursement this Period 60.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tramaine Marcano		Transaction ID: 30b-21-06712-06712 Date of Disbursement 11 / 07 / 2006	
Mailing Address 53 Elm Street		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Keith McKenzie		Transaction ID: 30b-21-06742-06742 Date of Disbursement 11 / 07 / 2006	
Mailing Address 61 Georgia King Village		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jermayne Wheeler		Transaction ID: 30b-21-06743-06743 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 64 N. Munn Apt 38		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rahman Shahid		Transaction ID: 30b-21-06780-06780 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Marshall Street		Amount of Each Disbursement this Period 60.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Flora Saldaniita		Transaction ID: 30b-21-06782-06782 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 491 Stuyvesant Avenue		Amount of Each Disbursement this Period 60.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Boone-Speakman		Transaction ID: 30b-21-06786-06786	
Mailing Address 19 Hazel Place		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Irvington	State NJ	Zip Code 07111	Amount of Each Disbursement this Period 60.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Aliyah Bowen		Transaction ID: 30b-21-06787-06787	
Mailing Address 119 Mapes Avenue		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Newark	State NJ	Zip Code	Amount of Each Disbursement this Period 60.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Michelle Durham		Transaction ID: 30b-21-06795-06795	
Mailing Address 165 Avon Avenue		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Newark	State NJ	Zip Code 07108	Amount of Each Disbursement this Period 60.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	180.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Douglas Coleman Full Name (Last, First, Middle Initial) Mailing Address 153-A Avenueon Avenue City Newark State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06796-06796 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Brsean Cline Full Name (Last, First, Middle Initial) Mailing Address 165 Avon Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06797-06797 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Patrice Ayers Full Name (Last, First, Middle Initial) Mailing Address 20 Muhammed Ali Avenue City Newark State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06800-06800 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hakim Beasley		Transaction ID: 30b-21-06810-06810 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 608 Chancellor Avenue		Amount of Each Disbursement this Period 60.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Melinda Cey		Transaction ID: 30b-21-06814-06814 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 109 Paine Avenue		Amount of Each Disbursement this Period 60.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Carol Coleman		Transaction ID: 30b-21-06815-06815 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 24 Homestead Park		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Arlene Gibbs		Transaction ID: 30b-21-06820-06820 Date of Disbursement 11 / 07 / 2006	
Mailing Address 311 Park Place		Amount of Each Disbursement this Period 60.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jasmine Harris		Transaction ID: 30b-21-06824-06824 Date of Disbursement 11 / 07 / 2006	
Mailing Address 626 20th Street		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ellen Lagao		Transaction ID: 30b-21-06837-06837 Date of Disbursement 11 / 07 / 2006	
Mailing Address 19 Fern Avenue		Amount of Each Disbursement this Period 60.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Janelle Lowery		Transaction ID: 30b-21-06840-06840 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 353 Leslie Street		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tanajah Lowery		Transaction ID: 30b-21-06841-06841 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 353 Leslie Street		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tina Lucas		Transaction ID: 30b-21-06843-06843 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 319 Coit Street		Amount of Each Disbursement this Period 60.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Beverly McClain Full Name (Last, First, Middle Initial) Mailing Address 149 Augsta Street City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06845-06845 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Omar Milligan Full Name (Last, First, Middle Initial) Mailing Address 49 North Street City Paterson State NJ Zip Code 07524 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06846-06846 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Lamar Morrison Full Name (Last, First, Middle Initial) Mailing Address 29 Western Parkway City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06847-06847 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Talya Sinclair		Transaction ID: 30b-21-06849-06849 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 208 Lyons Avenue		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tamara Suvil		Transaction ID: 30b-21-06850-06850 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 60.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Al-Rashied Turner		Transaction ID: 30b-21-06856-06856 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 147 James Street Apt 2A		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1000 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shakina Hickson		Transaction ID: 30b-21-06861-06861 Date of Disbursement 11 / 07 / 2006	
Mailing Address 23 Western Parkway		Amount of Each Disbursement this Period 60.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Emma Guice		Transaction ID: 30b-21-06862-06862 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1 Hazel Place		Amount of Each Disbursement this Period 60.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Danielle Elizaire		Transaction ID: 30b-21-06867-06867 Date of Disbursement 11 / 07 / 2006	
Mailing Address 86 Ridge Avenue		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	60.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tramaine Marcano		Transaction ID: 30b-21-06868-06868 Date of Disbursement 11 / 07 / 2006	
Mailing Address 53 Elm Street		Amount of Each Disbursement this Period 60.00	
City West Orange	State NJ	Zip Code 07052	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. George Carrero		Transaction ID: 30b-21-06870-06870 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 Ella Street		Amount of Each Disbursement this Period 60.00	
City Bloomfield	State NJ	Zip Code 07003	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Jesse Diaz		Transaction ID: 30b-21-06871-06871 Date of Disbursement 11 / 07 / 2006	
Mailing Address 10 Waldo Avenue #1		Amount of Each Disbursement this Period 60.00	
City Bloomfield	State NJ	Zip Code 07003	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Osagie Ekenezar		Transaction ID: 30b-21-06872-06872 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 301 Rose Street		Amount of Each Disbursement this Period 60.00	
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Scotty Ansong		Transaction ID: 30b-21-06874-06874 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 131 Washington Street		Amount of Each Disbursement this Period 60.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Alaji Ali		Transaction ID: 30b-21-06875-06875 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 142 Main Street Apt. 1		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anthony Wiltshire		Transaction ID: 30b-21-06877-06877 Date of Disbursement 11 / 07 / 2006
Mailing Address 128 Hillyer Street		Amount of Each Disbursement this Period 60.00
City East Orange	State NJ Zip Code 07017	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Adam Axelrod		Transaction ID: 30b-21-06897-06897 Date of Disbursement 11 / 07 / 2006
Mailing Address 14 Seaman Road		Amount of Each Disbursement this Period 60.00
City West Orange	State NJ Zip Code 07052	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Michael Esqueree		Transaction ID: 30b-21-06898-06898 Date of Disbursement 11 / 07 / 2006
Mailing Address 181 Mitchell Street		Amount of Each Disbursement this Period 60.00
City West Orange	State NJ Zip Code 07052	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1004 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adrianna Rockford		Transaction ID: 30b-21-06900-06900 Date of Disbursement 11 / 07 / 2006	
Mailing Address 112 Ray Street		Amount of Each Disbursement this Period 60.00	
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Adam Arena		Transaction ID: 30b-21-06912-06912 Date of Disbursement 11 / 07 / 2006	
Mailing Address 18 Park Drive South 1st Floor		Amount of Each Disbursement this Period 60.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ryan Tice		Transaction ID: 30b-21-06917-06917 Date of Disbursement 11 / 07 / 2006	
Mailing Address 151 Prospect Avenue, Apartment 6F		Amount of Each Disbursement this Period 60.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	60.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Claudeen Benoit Full Name (Last, First, Middle Initial) Mailing Address 10 North Kowain Place City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06924-06924 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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B. Theo Pollack Full Name (Last, First, Middle Initial) Mailing Address 14 North Cobane Terrace City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06927-06927 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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C. Larissa Folk Full Name (Last, First, Middle Initial) Mailing Address PO Box 1067 City Maplewood State NJ Zip Code 07040 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-06928-06928 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eva Cirilo		Transaction ID: 30b-21-06929-06929 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 5809 Hudson Avenue		Amount of Each Disbursement this Period 60.00
City West New York State NJ Zip Code 07093		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Donald Kraszewski		Transaction ID: 30b-21-06930-06930 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7 Jefferson Street		Amount of Each Disbursement this Period 60.00
City Belleville State NJ Zip Code 07109		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael Esqueree		Transaction ID: 30b-21-06940-06940 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 181 Mitchell Street		Amount of Each Disbursement this Period 60.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1007 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Arena		Transaction ID: 30b-21-06941-06941
Mailing Address 18 Park Drive South 1st Floor		Date of Disbursement 11 / 07 / 2006
City West Orange	State NJ	Zip Code 07052
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 60.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Rick Pierre-Philipp		Transaction ID: 30b-21-06942-06942
Mailing Address 152 South Valley Road		Date of Disbursement 11 / 07 / 2006
City West Orange	State NJ	Zip Code 07052
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 60.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Robert DePaul		Transaction ID: 30b-21-06943-06943
Mailing Address 3 Brook End Drive		Date of Disbursement 11 / 07 / 2006
City West Orange	State NJ	Zip Code 07052
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 60.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	180.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Naomi Gonzalez		Transaction ID: 30b-21-06944-06944 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 203 Watchung Avenue		Amount of Each Disbursement this Period 60.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Beatrice Gonzalez		Transaction ID: 30b-21-06945-06945 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 203 Watchung Avenue Apt 2		Amount of Each Disbursement this Period 60.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Debbie Walker		Transaction ID: 30b-21-07010-07010 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 226 Rennen Avenue		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07112		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1009 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Debbie Walker		Transaction ID: 30b-21-07012-07012 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 226 Rennen Avenue		Amount of Each Disbursement this Period 60.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Natalie Agboyibar		Transaction ID: 30b-21-07061-07061 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 64 Tensaw Drive		Amount of Each Disbursement this Period 50.00
City Browns Mills State NJ Zip Code 08015	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kaisha Mercado		Transaction ID: 30b-21-07062-07062 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 812 Tulip Street		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1010 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Paul Olszewski		Transaction ID: 30b-21-07064-07064 Date of Disbursement 11 / 07 / 2006	
Mailing Address 321 Huntington Avenue		Amount of Each Disbursement this Period 50.00	
City Glendora State NJ Zip Code 08029	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Danielle Garcia		Transaction ID: 30b-21-07065-07065 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1141 Sheridan Avenue		Amount of Each Disbursement this Period 50.00	
City Bellmawr State NJ Zip Code 08031	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Maraud Pemberton		Transaction ID: 30b-21-07066-07066 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 Joseph Drive		Amount of Each Disbursement this Period 50.00	
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1011 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joshua Bateman Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-07067-07067 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 412 Broadway Avenue		Amount of Each Disbursement this Period 50.00
City Westville State NJ Zip Code 08093	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Tarr Harris Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-07068-07068 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 200 Mullica Hill Road		Amount of Each Disbursement this Period 50.00
City Glassboro State NJ Zip Code 08028	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Dru Mealing Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-07069-07069 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 485 Cary Street		Amount of Each Disbursement this Period 50.00
City Orange State NJ Zip Code 07050	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kaisha Mercado		Transaction ID: 30b-21-07070-07070 Date of Disbursement 11 / 07 / 2006	
Mailing Address 812 Tulip Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Karen Badie		Transaction ID: 30b-21-07071-07071 Date of Disbursement 11 / 07 / 2006	
Mailing Address 520 Collings Avenue Apartment 403B		Amount of Each Disbursement this Period 50.00	
City Collingswood State NJ Zip Code 08017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Canary		Transaction ID: 30b-21-07074-07074 Date of Disbursement 11 / 07 / 2006	
Mailing Address 28 Walnut Street		Amount of Each Disbursement this Period 50.00	
City Beachwood State NJ Zip Code 08722	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Myra Arroyo		Transaction ID: 30b-21-07076-07076	
Mailing Address 1711 Heather Place		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Clementon	State NJ	Zip Code 08021	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Brian Kratky		Transaction ID: 30b-21-07077-07077	
Mailing Address 1268 Robinson Terrace		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Union	State NJ	Zip Code 07083	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Johann Lohrmann		Transaction ID: 30b-21-07080-07080	
Mailing Address 121 Maple Avenue		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Williamstown	State NJ	Zip Code 08094	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1014 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kyle Lohrmann		Transaction ID: 30b-21-07081-07081 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 121 Maple Avenue		Amount of Each Disbursement this Period 50.00
City Williamstown State NJ Zip Code 08094	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tammy Mitchell		Transaction ID: 30b-21-07082-07082 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 11 Greendale Road		Amount of Each Disbursement this Period 50.00
City Newton State NJ Zip Code 07860	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Judith Dutton		Transaction ID: 30b-21-07083-07083 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 50.00
City Franklinville State NJ Zip Code 08322	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1015 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ryan Carbain		Transaction ID: 30b-21-07085-07085 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 325 Hudson Drive		Amount of Each Disbursement this Period 50.00
City State Zip Code Brick NJ 08028	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ryan Carbain		Transaction ID: 30b-21-07086-07086 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 325 Hudson Drive		Amount of Each Disbursement this Period 50.00
City State Zip Code Brick NJ 08028	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ryan Carbain		Transaction ID: 30b-21-07087-07087 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 325 Hudson Drive		Amount of Each Disbursement this Period 50.00
City State Zip Code Brick NJ 08028	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1016 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Paul Olszewski Full Name (Last, First, Middle Initial) Mailing Address 321 Huntington Avenue City Glendora State NJ Zip Code 08029 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07088-07088 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Danielle Garcia Full Name (Last, First, Middle Initial) Mailing Address 1141 Sheridan Avenue City Bellmawr State NJ Zip Code 08031 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07089-07089 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Maraud Pemberton Full Name (Last, First, Middle Initial) Mailing Address 26 Joseph Drive City Sewell State NJ Zip Code 08080 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07091-07091 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1017 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dru Mealing		Transaction ID: 30b-21-07092-07092 Date of Disbursement 11 / 07 / 2006	
Mailing Address 485 Cary Street		Amount of Each Disbursement this Period 50.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Myra Arroyo		Transaction ID: 30b-21-07093-07093 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1711 Heather Place		Amount of Each Disbursement this Period 50.00	
City Clementon State NJ Zip Code 08021	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Canary		Transaction ID: 30b-21-07094-07094 Date of Disbursement 11 / 07 / 2006	
Mailing Address 28 Walnut Street		Amount of Each Disbursement this Period 50.00	
City Beachwood State NJ Zip Code 08722	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1018 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tarr Harris		Transaction ID: 30b-21-07095-07095 Date of Disbursement 11 / 07 / 2006	
Mailing Address 200 Mullica Hill Road		Amount of Each Disbursement this Period 50.00	
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kyle Lohrmann		Transaction ID: 30b-21-07096-07096 Date of Disbursement 11 / 07 / 2006	
Mailing Address 121 Maple Avenue		Amount of Each Disbursement this Period 50.00	
City Williamstown State NJ Zip Code 08094	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Johann Lohrmann		Transaction ID: 30b-21-07097-07097 Date of Disbursement 11 / 07 / 2006	
Mailing Address 121 Maple Avenue		Amount of Each Disbursement this Period 50.00	
City Williamstown State NJ Zip Code 08094	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Judith Dutton		Transaction ID: 30b-21-07099-07099 Date of Disbursement 11 / 07 / 2006
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 50.00
City Franklinville State NJ Zip Code 08322		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. John Duthie		Transaction ID: 30b-21-07100-07100 Date of Disbursement 11 / 07 / 2006
Mailing Address 100 Robbinsville Allentown Road		Amount of Each Disbursement this Period 50.00
City Robbinsville State NJ Zip Code 08691		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Myra Arroyo		Transaction ID: 30b-21-07102-07102 Date of Disbursement 11 / 07 / 2006
Mailing Address 1711 Heather Place		Amount of Each Disbursement this Period 50.00
City Clementon State NJ Zip Code 08021		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Faith Franklin		Transaction ID: 30b-21-07103-07103 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 200 Mullica Hill Road Box 2011		Amount of Each Disbursement this Period 50.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tarr Harris		Transaction ID: 30b-21-07104-07104 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 200 Mullica Hill Road		Amount of Each Disbursement this Period 50.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maraud Pemberton		Transaction ID: 30b-21-07105-07105 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 26 Joseph Drive		Amount of Each Disbursement this Period 50.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Karen Badie		Transaction ID: 30b-21-07106-07106 Date of Disbursement 11 / 07 / 2006	
Mailing Address 520 Collings Avenue Apartment 403B		Amount of Each Disbursement this Period 50.00	
City Collingswood State NJ Zip Code 08017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dru Mealing		Transaction ID: 30b-21-07107-07107 Date of Disbursement 11 / 07 / 2006	
Mailing Address 485 Cary Street		Amount of Each Disbursement this Period 50.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Judith Dutton		Transaction ID: 30b-21-07109-07109 Date of Disbursement 11 / 07 / 2006	
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 50.00	
City Franklinville State NJ Zip Code 08322	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kyle Lohrmann		Transaction ID: 30b-21-07110-07110 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 121 Maple Avenue		Amount of Each Disbursement this Period 50.00
City Williamstown State NJ Zip Code 08094	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Johann Lohrmann		Transaction ID: 30b-21-07111-07111 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 121 Maple Avenue		Amount of Each Disbursement this Period 50.00
City Williamstown State NJ Zip Code 08094	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tammy Mitchell		Transaction ID: 30b-21-07112-07112 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 11 Greendale Road		Amount of Each Disbursement this Period 50.00
City Newton State NJ Zip Code 07860	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Paul Olszewski Full Name (Last, First, Middle Initial) Mailing Address 321 Huntington Avenue City Glendora State NJ Zip Code 08029 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07113-07113 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Danielle Garcia Full Name (Last, First, Middle Initial) Mailing Address 1141 Sheridan Avenue City Bellmawr State NJ Zip Code 08031 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07114-07114 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Myra Arroyo Full Name (Last, First, Middle Initial) Mailing Address 1711 Heather Place City Clementon State NJ Zip Code 08021 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07115-07115 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maraud Pemberton		Transaction ID: 30b-21-07117-07117 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 26 Joseph Drive		Amount of Each Disbursement this Period 50.00	
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tarr Harris		Transaction ID: 30b-21-07118-07118 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 200 Mullica Hill Road		Amount of Each Disbursement this Period 50.00	
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Karen Badie		Transaction ID: 30b-21-07119-07119 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 520 Collings Avenue Apartment 403B		Amount of Each Disbursement this Period 50.00	
City Collingswood State NJ Zip Code 08017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dru Mealing		Transaction ID: 30b-21-07120-07120 Date of Disbursement 11 / 07 / 2006
Mailing Address 485 Cary Street		Amount of Each Disbursement this Period 50.00
City Orange	State NJ	
Zip Code 07050		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Johann Lohrmann		Transaction ID: 30b-21-07122-07122 Date of Disbursement 11 / 07 / 2006
Mailing Address 121 Maple Avenue		Amount of Each Disbursement this Period 50.00
City Williamstown	State NJ	
Zip Code 08094		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Judith Dutton		Transaction ID: 30b-21-07123-07123 Date of Disbursement 11 / 07 / 2006
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 50.00
City Franklinville	State NJ	
Zip Code 08322		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kyle Lohrmann		Transaction ID: 30b-21-07124-07124 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 121 Maple Avenue		Amount of Each Disbursement this Period 50.00
City Williamstown State NJ Zip Code 08094	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tammy Mitchell		Transaction ID: 30b-21-07125-07125 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 11 Greendale Road		Amount of Each Disbursement this Period 50.00
City Newton State NJ Zip Code 07860	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Danielle Garcia		Transaction ID: 30b-21-07126-07126 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1141 Sheridan Avenue		Amount of Each Disbursement this Period 50.00
City Bellmawr State NJ Zip Code 08031	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Paul Olszewski		Transaction ID: 30b-21-07127-07127 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 321 Huntington Avenue		Amount of Each Disbursement this Period 50.00
City Glendora State NJ Zip Code 08029	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kaisha Mercado		Transaction ID: 30b-21-07128-07128 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 812 Tulip Street		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kaisha Mercado		Transaction ID: 30b-21-07129-07129 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 812 Tulip Street		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Natalie Agboyibar		Transaction ID: 30b-21-07131-07131 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 64 Tensaw Drive		Amount of Each Disbursement this Period 50.00
City Brownsmills State NJ Zip Code 08015	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Thomasina Dunton		Transaction ID: 30b-21-07189-07189 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 51 Grant Avenue 2nd Floor		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Deborah Norwood		Transaction ID: 30b-21-07191-07191 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jacqueline Burrough		Transaction ID: 30b-21-07202-07202 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7 Centerway Avenue		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07012	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jeanette Nunez		Transaction ID: 30b-21-07207-07207 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 190 VanNostrand Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kevin Diggs		Transaction ID: 30b-21-07213-07213 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 49 Clinton Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1030 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lativia Waldron		Transaction ID: 30b-21-07216-07216 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 112 Bostwick Ave		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Yasheida Taylor		Transaction ID: 30b-21-07217-07217 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 754 Communipaw Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Maria Javier		Transaction ID: 30b-21-07218-07218 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 205 Monticello Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Reina Delacruz		Transaction ID: 30b-21-07220-07220 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 358 Montgomery Street Apt. 5G		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kenneth Rowe		Transaction ID: 30b-21-07228-07228 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 61 North Arlington Avenue		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Blanca Diaz		Transaction ID: 30b-21-07230-07230 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 25 Grace Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yvette Manning		Transaction ID: 30b-21-07231-07231 Date of Disbursement 11 / 07 / 2006	
Mailing Address 34 Bleeker Street		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James Diggs		Transaction ID: 30b-21-07232-07232 Date of Disbursement 11 / 07 / 2006	
Mailing Address 62 Rutgers Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joyce Praylow		Transaction ID: 30b-21-07233-07233 Date of Disbursement 11 / 07 / 2006	
Mailing Address 62 Rutgers Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stephon Reeves		Transaction ID: 30b-21-07234-07234 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 145 Dwight Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dawn Thornton		Transaction ID: 30b-21-07236-07236 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1 Waterview Drive		Amount of Each Disbursement this Period 50.00
City Lakewood State NJ Zip Code 08701		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nyeisha Thompson		Transaction ID: 30b-21-07238-07238 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 240 Clerk Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07304		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tiona Hawkins		Transaction ID: 30b-21-07239-07239 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 164 Streetegman Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Eugene Streeter		Transaction ID: 30b-21-07274-07274 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 143 Fulton Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Deborah Norwood		Transaction ID: 30b-21-07285-07285 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dawn Thorton		Transaction ID: 30b-21-07287-07287 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1 Waterview Drive		Amount of Each Disbursement this Period 50.00
City Lakewood State NJ Zip Code 08701	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Deborah Norwood		Transaction ID: 30b-21-07288-07288 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Deborah Norwood		Transaction ID: 30b-21-07289-07289 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1036 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Roland Goodson Full Name (Last, First, Middle Initial) Mailing Address 310 South Harrison Street City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07290-07290 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Stephon Reeves Full Name (Last, First, Middle Initial) Mailing Address 145 Dwight Street City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07291-07291 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Kevin Diggs Full Name (Last, First, Middle Initial) Mailing Address 49 Clinton Avenue City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07292-07292 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Reina Delacruz		Transaction ID: 30b-21-07293-07293 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 358 Montgomery Street Apt. 5G		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Yvette Manning		Transaction ID: 30b-21-07294-07294 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 34 Bleeker Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Maria Javier		Transaction ID: 30b-21-07295-07295 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 205 Monticello Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Jacqueline Burrough</p>		<p>Transaction ID: 30b-21-07301-07301 Date of Disbursement</p>	
<p>Mailing Address 7 Centerway Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City East Orange</p>	<p>State NJ</p>	<p>Zip Code 07012</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>B. Full Name (Last, First, Middle Initial) Fuquan Mutalib</p>		<p>Transaction ID: 30b-21-07302-07302 Date of Disbursement</p>	
<p>Mailing Address 7 Center Way</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City East Orange</p>	<p>State NJ</p>	<p>Zip Code 07017</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>C. Full Name (Last, First, Middle Initial) Tyrell Watford</p>		<p>Transaction ID: 30b-21-07303-07303 Date of Disbursement</p>	
<p>Mailing Address 30 Stevens Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Jersey City</p>	<p>State NJ</p>	<p>Zip Code 07305</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Blanca Diaz Full Name (Last, First, Middle Initial) Mailing Address 25 Grace Street City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07305-07305 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Kenneth Rowe Full Name (Last, First, Middle Initial) Mailing Address 61 North Arlington Avenue City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07306-07306 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Walter Payton Full Name (Last, First, Middle Initial) Mailing Address 391 Forrest Street City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07307-07307 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eugene Streeter		Transaction ID: 30b-21-07308-07308 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 143 Fulton Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Deborah Norwood		Transaction ID: 30b-21-07310-07310 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Deborah Norwood		Transaction ID: 30b-21-07311-07311 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1041 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Deborah Norwood		Transaction ID: 30b-21-07312-07312 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Deborah Norwood		Transaction ID: 30b-21-07313-07313 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kenneth Rowe		Transaction ID: 30b-21-07318-07318 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 61 North Arlington Avenue		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Eugene Streeter Full Name (Last, First, Middle Initial) Mailing Address 143 Fulton Avenue City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07319-07319 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Fuquan Mutalib Full Name (Last, First, Middle Initial) Mailing Address 7 Center Way City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07320-07320 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Stephon Reeves Full Name (Last, First, Middle Initial) Mailing Address 145 Dwight Street City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07321-07321 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roland Goodson		Transaction ID: 30b-21-07322-07322 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 310 South Harrison Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Halima Williams		Transaction ID: 30b-21-07326-07326 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 211 Orange Road		Amount of Each Disbursement this Period 50.00
City Montclair State NJ Zip Code 07042		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Thomasina Dunton		Transaction ID: 30b-21-07327-07327 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 51 Grant Avenue 2nd Floor		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Diggs		Transaction ID: 30b-21-07328-07328 Date of Disbursement 11 / 07 / 2006	
Mailing Address 49 Clinton Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Travis Long		Transaction ID: 30b-21-07329-07329 Date of Disbursement 11 / 07 / 2006	
Mailing Address 585 Bergen Ave bsmnt#2		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jeffrey Felusme		Transaction ID: 30b-21-07337-07337 Date of Disbursement 11 / 07 / 2006	
Mailing Address 70 Wade Street		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yvette Manning		Transaction ID: 30b-21-07338-07338 Date of Disbursement 11 / 07 / 2006
Mailing Address 34 Bleeker Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lativia Waldron		Transaction ID: 30b-21-07340-07340 Date of Disbursement 11 / 07 / 2006
Mailing Address 112 Bostwick Ave		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jorge Davalos		Transaction ID: 30b-21-07357-07357 Date of Disbursement 11 / 07 / 2006
Mailing Address 125 Van Wagenen Avenue Apt 302		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07801	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jorge Davalos		Transaction ID: 30b-21-07368-07368 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 125 Van Wagenen Avenue Apt 302		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07801	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Joshua Padilla		Transaction ID: 30b-21-07381-07381 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 17 Beacon Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Gianina Valdivieso		Transaction ID: 30b-21-07387-07387 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 379 Manila Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gisselle Madariaga		Transaction ID: 30b-21-07388-07388 Date of Disbursement 11 / 07 / 2006
Mailing Address 305 45TH St.		Amount of Each Disbursement this Period 50.00
City Union city	State NJ Zip Code 07087	
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Frank Schmetz		Transaction ID: 30b-21-07391-07391 Date of Disbursement 11 / 07 / 2006
Mailing Address 146 Carlton Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City	State NJ Zip Code 07307	
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Peter Rosario		Transaction ID: 30b-21-07394-07394 Date of Disbursement 11 / 07 / 2006
Mailing Address 17 Gracie Road		Amount of Each Disbursement this Period 50.00
City East Hanover	State NJ Zip Code 07936	
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Johanna Recinos</p>		<p>Transaction ID: 30b-21-07395-07395 Date of Disbursement</p>	
<p>Mailing Address 7 Main Terrace</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Bloomfield</p>	<p>State NJ</p>	<p>Zip Code 07003</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>B. Full Name (Last, First, Middle Initial) Samantha Hernandez</p>		<p>Transaction ID: 30b-21-07396-07396 Date of Disbursement</p>	
<p>Mailing Address 319 Fairmount Avenue Apt. 1</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Jersey City</p>	<p>State NJ</p>	<p>Zip Code 07307</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>C. Full Name (Last, First, Middle Initial) Ada Fuentes</p>		<p>Transaction ID: 30b-21-07397-07397 Date of Disbursement</p>	
<p>Mailing Address 111 Prospect Street, Apartment 1L</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Jersey City</p>	<p>State NJ</p>	<p>Zip Code 07307</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Monica Compre		Transaction ID: 30b-21-07399-07399 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Fleet Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Erick Camacho		Transaction ID: 30b-21-07400-07400 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 24C		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jessica Brodie		Transaction ID: 30b-21-07401-07401 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 Highland Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cinthya Toledo		Transaction ID: 30b-21-07403-07403 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 111 Lincoln Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jessica Brodie		Transaction ID: 30b-21-07409-07409 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 Highland Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Erick Camacho		Transaction ID: 30b-21-07410-07410 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 24C		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Monica Compre		Transaction ID: 30b-21-07411-07411 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Fleet Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ada Fuentes		Transaction ID: 30b-21-07412-07412 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 111 Prospect Street, Apartment 1L		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Samantha Hernandez		Transaction ID: 30b-21-07413-07413 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 319 Fairmount Avenue Apt. 1		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gisselle Madariaga		Transaction ID: 30b-21-07414-07414 Date of Disbursement 11 / 07 / 2006
Mailing Address 305 45TH St.		Amount of Each Disbursement this Period 50.00
City Union city State NJ Zip Code 07087	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Frank Schmetz		Transaction ID: 30b-21-07415-07415 Date of Disbursement 11 / 07 / 2006
Mailing Address 146 Carlton Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Peter Rosario		Transaction ID: 30b-21-07419-07419 Date of Disbursement 11 / 07 / 2006
Mailing Address 17 Gracie Road		Amount of Each Disbursement this Period 50.00
City East Hanover State NJ Zip Code 07936	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Johanna Recinos		Transaction ID: 30b-21-07420-07420 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7 Main Terrace		Amount of Each Disbursement this Period 50.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Gianina Valdivieso		Transaction ID: 30b-21-07421-07421 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 379 Manila Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. David Laboy		Transaction ID: 30b-21-07424-07424 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 11H		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jorge Davalos		Transaction ID: 30b-21-07427-07427 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 125 Van Wagenen Avenue Apt 302		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07801	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Erick Camacho		Transaction ID: 30b-21-07438-07438 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 24C		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Monica Compre		Transaction ID: 30b-21-07439-07439 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Fleet Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ada Fuentes		Transaction ID: 30b-21-07440-07440 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 111 Prospect Street, Apartment 1L		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Samantha Hernandez		Transaction ID: 30b-21-07443-07443 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 319 Fairmount Avenue Apt. 1		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Frank Schmetz		Transaction ID: 30b-21-07446-07446 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 146 Carlton Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Peter Rosario Full Name (Last, First, Middle Initial) Mailing Address 17 Gracie Road City East Hanover State NJ Zip Code 07936 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07450-07450 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Johanna Recinos Full Name (Last, First, Middle Initial) Mailing Address 7 Main Terrace City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07451-07451 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Gianina Valdivieso Full Name (Last, First, Middle Initial) Mailing Address 379 Manila Avenue City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07452-07452 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. David Laboy		Transaction ID: 30b-21-07480-07480 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 11H		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Cinthya Toledo		Transaction ID: 30b-21-07486-07486 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 111 Lincoln Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Joseph Pagan		Transaction ID: 30b-21-07487-07487 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 162 Third Street Apt 86		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yazmin Clemente		Transaction ID: 30b-21-07488-07488 Date of Disbursement 11 / 07 / 2006
Mailing Address 127 Charles Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Vanessa Normand		Transaction ID: 30b-21-07489-07489 Date of Disbursement 11 / 07 / 2006
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Joseph Pagan		Transaction ID: 30b-21-07497-07497 Date of Disbursement 11 / 07 / 2006
Mailing Address 162 Third Street Apt 86		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rosa Hidalgo		Transaction ID: 30b-21-07499-07499 Date of Disbursement 11 / 07 / 2006	
Mailing Address 230 Whiton St		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Vanessa Normand		Transaction ID: 30b-21-07502-07502 Date of Disbursement 11 / 07 / 2006	
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jorge Davalos		Transaction ID: 30b-21-07509-07509 Date of Disbursement 11 / 07 / 2006	
Mailing Address 125 Van Wagenen Avenue Apt 302		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07801	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joseph Pagan Full Name (Last, First, Middle Initial) Mailing Address 162 Third Street Apt 86 City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07510-07510 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Joshua Padilla Full Name (Last, First, Middle Initial) Mailing Address 17 Beacon Avenue City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07513-07513 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Yazmin Clemente Full Name (Last, First, Middle Initial) Mailing Address 127 Charles Street City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07521-07521 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carol Normand		Transaction ID: 30b-21-07523-07523 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Normand		Transaction ID: 30b-21-07524-07524 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gilberto Rogalski		Transaction ID: 30b-21-07526-07526 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 166 Grand Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Flores		Transaction ID: 30b-21-07531-07531 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 148 Highland Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cinthya Toledo		Transaction ID: 30b-21-07539-07539 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 111 Lincoln Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. David Laboy		Transaction ID: 30b-21-07540-07540 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 11H		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07302	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anna Marie Meyers		Transaction ID: 30b-21-07712-07712 Date of Disbursement 11 / 07 / 2006	
Mailing Address 38 West 7th Street		Amount of Each Disbursement this Period 50.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rayen Sipes		Transaction ID: 30b-21-07714-07714 Date of Disbursement 11 / 07 / 2006	
Mailing Address 175 West 49th Street		Amount of Each Disbursement this Period 50.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Daniel McMahon		Transaction ID: 30b-21-07717-07717 Date of Disbursement 11 / 07 / 2006	
Mailing Address 62 Linden Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sean Matthias		Transaction ID: 30b-21-07720-07720 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 4 Skillman Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Thomas Lambert		Transaction ID: 30b-21-07746-07746 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 11 Jefferson Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Joseph Conte		Transaction ID: 30b-21-07781-07781 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 204 Bartholdi Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph Conte		Transaction ID: 30b-21-07782-07782 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 204 Bartholdi Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Patrick Desmond		Transaction ID: 30b-21-07783-07783 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 131 West 4th Street		Amount of Each Disbursement this Period 50.00
City Bayonne State NJ Zip Code 07002	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. John Bonomo		Transaction ID: 30b-21-07784-07784 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 10 Oak Street		Amount of Each Disbursement this Period 50.00
City Bayonne State NJ Zip Code 07002	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mohamed Abdelazim		Transaction ID: 30b-21-07787-07787 Date of Disbursement 11 / 07 / 2006
Mailing Address 61 Tonnelle Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marian Hanna		Transaction ID: 30b-21-07794-07794 Date of Disbursement 11 / 07 / 2006
Mailing Address 59 Tuers Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Renee Azer		Transaction ID: 30b-21-07797-07797 Date of Disbursement 11 / 07 / 2006
Mailing Address 528 Kennedy Boulevard 2nd Floor		Amount of Each Disbursement this Period 50.00
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Paul Silletti Full Name (Last, First, Middle Initial) Mailing Address 264 Neptune Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07804-07804 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Jeffrey East Full Name (Last, First, Middle Initial) Mailing Address 75 Clark Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07805-07805 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Harry Aceti Full Name (Last, First, Middle Initial) Mailing Address 8 Highway Road City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07806-07806 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Ann Aceti		Transaction ID: 30b-21-07808-07808 Date of Disbursement 11 / 07 / 2006	
Mailing Address 8 Highview Road		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Duane Hraska		Transaction ID: 30b-21-07810-07810 Date of Disbursement 11 / 07 / 2006	
Mailing Address 229 East 28th Street		Amount of Each Disbursement this Period 50.00	
City New York State NY Zip Code 10019	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Juan Mateo		Transaction ID: 30b-21-07812-07812 Date of Disbursement 11 / 07 / 2006	
Mailing Address 358 Montgomery Street		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Robert Motcera		Transaction ID: 30b-21-07814-07814 Date of Disbursement 11 / 07 / 2006
Mailing Address 7 Clark Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Thomas Sheridan		Transaction ID: 30b-21-07815-07815 Date of Disbursement 11 / 07 / 2006
Mailing Address 95 Courthouse Place		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Martin Ellison		Transaction ID: 30b-21-07816-07816 Date of Disbursement 11 / 07 / 2006
Mailing Address 417 Avenue A		Amount of Each Disbursement this Period 50.00
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yeris Romero		Transaction ID: 30b-21-07818-07818 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 407 3rd Street		Amount of Each Disbursement this Period 50.00
City Union City State NJ Zip Code		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sharon Soekhrum		Transaction ID: 30b-21-07825-07825 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 62 Wright Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Margaret Pilla		Transaction ID: 30b-21-07826-07826 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 23 Harvard Place		Amount of Each Disbursement this Period 50.00
City Belleville State NJ Zip Code 07109		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Margaret Pilla		Transaction ID: 30b-21-07827-07827 Date of Disbursement 11 / 07 / 2006	
Mailing Address 23 Harvard Place		Amount of Each Disbursement this Period 50.00	
City Belleville	State NJ	Zip Code 07109	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Margaret Pilla		Transaction ID: 30b-21-07828-07828 Date of Disbursement 11 / 07 / 2006	
Mailing Address 23 Harvard Place		Amount of Each Disbursement this Period 50.00	
City Belleville	State NJ	Zip Code 07109	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Margaret Pilla		Transaction ID: 30b-21-07829-07829 Date of Disbursement 11 / 07 / 2006	
Mailing Address 23 Harvard Place		Amount of Each Disbursement this Period 50.00	
City Belleville	State NJ	Zip Code 07109	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mondee Hadibroto		Transaction ID: 30b-21-07836-07836 Date of Disbursement 11 / 07 / 2006	
Mailing Address 116 duncan Avenue Apt 1 R		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Shady Sheriff		Transaction ID: 30b-21-07838-07838 Date of Disbursement 11 / 07 / 2006	
Mailing Address 17 West 20th Street		Amount of Each Disbursement this Period 50.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Shady Sheriff		Transaction ID: 30b-21-07839-07839 Date of Disbursement 11 / 07 / 2006	
Mailing Address 17 West 20th Street		Amount of Each Disbursement this Period 50.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kiroles Soliman		Transaction ID: 30b-21-07842-07842 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 39 East 26th Street Apt 3		Amount of Each Disbursement this Period 50.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kiroles Soliman		Transaction ID: 30b-21-07843-07843 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 39 East 26th Street Apt 3		Amount of Each Disbursement this Period 50.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kiroles Soliman		Transaction ID: 30b-21-07844-07844 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 39 East 26th Street Apt 3		Amount of Each Disbursement this Period 50.00	
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kiroles Soliman Full Name (Last, First, Middle Initial) Mailing Address 39 East 26th Street Apt 3 City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07845-07845 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Martha Alicea Full Name (Last, First, Middle Initial) Mailing Address 175 New York Avenue City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07856-07856 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Grace Shokr Full Name (Last, First, Middle Initial) Mailing Address 104 Fairview Avenue City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07857-07857 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Renee Azer Full Name (Last, First, Middle Initial) Mailing Address 528 Kennedy Boulevard 2nd Floor City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07858-07858 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Kiroles Soliman Full Name (Last, First, Middle Initial) Mailing Address 39 East 26th Street Apt 3 City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07859-07859 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Daniel McMahon Full Name (Last, First, Middle Initial) Mailing Address 62 Linden Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07863-07863 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Grace Shokr		Transaction ID: 30b-21-07864-07864 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 104 Fairview Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07304	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Renee Azer		Transaction ID: 30b-21-07865-07865 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 528 Kennedy Boulevard 2nd Floor		Amount of Each Disbursement this Period 50.00
City Bayonne State NJ Zip Code 07002	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sean Matthias		Transaction ID: 30b-21-07866-07866 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 4 Skillman Avenue		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ishmael Raines Full Name (Last, First, Middle Initial) Mailing Address 362 Oakland Street City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07868-07868 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Leon Rogers Full Name (Last, First, Middle Initial) Mailing Address 6-1 Fairway Drive City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07876-07876 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Mattie Horton Full Name (Last, First, Middle Initial) Mailing Address 70 North Clinton Avenue Apt 84 A City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07879-07879 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stacy Bryant		Transaction ID: 30b-21-07881-07881 Date of Disbursement 11 / 07 / 2006	
Mailing Address 800 Fairmount Avenue		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08629	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Sharon Godett		Transaction ID: 30b-21-07887-07887 Date of Disbursement 11 / 07 / 2006	
Mailing Address PO Box 322		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08603	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Guss Magby		Transaction ID: 30b-21-07888-07888 Date of Disbursement 11 / 07 / 2006	
Mailing Address 70 North Clinton Avenue Apt 84 A		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08609	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joanne Hicks Full Name (Last, First, Middle Initial) Mailing Address 6-1 Fairway Drive City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07889-07889 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Jerry Lewis Full Name (Last, First, Middle Initial) Mailing Address 38 Fowler Drive City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07894-07894 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Bruce Baker Full Name (Last, First, Middle Initial) Mailing Address 130 Broad Avenue City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07896-07896 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rena Maske		Transaction ID: 30b-21-07902-07902 Date of Disbursement 11 / 07 / 2006	
Mailing Address 455 Hamilton Avenue, # 5		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08609	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Craig Howard		Transaction ID: 30b-21-07903-07903 Date of Disbursement 11 / 07 / 2006	
Mailing Address 27 North Clinton Avenue Apt 109		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08609	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Charles Horne		Transaction ID: 30b-21-07908-07908 Date of Disbursement 11 / 07 / 2006	
Mailing Address 50 Escher Street		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08609	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jan Stokes Full Name (Last, First, Middle Initial) Mailing Address 27 North Clinton Avenue, Apt 209 City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07919-07919 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Gabrielle King Full Name (Last, First, Middle Initial) Mailing Address 910 Bellevue Avenue City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07922-07922 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Jan Stokes Full Name (Last, First, Middle Initial) Mailing Address 27 North Clinton Avenue, Apt 209 City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07938-07938 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Mattie Horton Full Name (Last, First, Middle Initial) Mailing Address 70 North Clinton Avenue Apt 84 A City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07943-07943 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Jan Stokes Full Name (Last, First, Middle Initial) Mailing Address 27 North Clinton Avenue, Apt 209 City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07944-07944 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Rena Maske Full Name (Last, First, Middle Initial) Mailing Address 455 Hamilton Avenue, # 5 City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07947-07947 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bruce Baker		Transaction ID: 30b-21-07949-07949 Date of Disbursement 11 / 07 / 2006	
Mailing Address 130 Broad Avenue		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08618	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Ishmael Raines		Transaction ID: 30b-21-07951-07951 Date of Disbursement 11 / 07 / 2006	
Mailing Address 362 Oakland Street		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08618	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Medina Wilson		Transaction ID: 30b-21-07954-07954 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2-2 Fairway Drive		Amount of Each Disbursement this Period 50.00	
City Trenton	State NJ	Zip Code 08618	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Bruce Baker Full Name (Last, First, Middle Initial) Mailing Address 130 Broad Avenue City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07957-07957 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Jerry Lewis Full Name (Last, First, Middle Initial) Mailing Address 38 Fowler Drive City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07958-07958 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Daphne Clausen Full Name (Last, First, Middle Initial) Mailing Address 264 S Liberty St City Hamilton State NJ Zip Code 08629 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-07998-07998 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. James Queally		Transaction ID: 30b-21-08003-08003 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 389 Barlow Avenue		Amount of Each Disbursement this Period 50.00
City Staten Island State NY Zip Code 10308	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Erin Duffy		Transaction ID: 30b-21-08004-08004 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christopher Zimbaldi		Transaction ID: 30b-21-08015-08015 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eric Freda		Transaction ID: 30b-21-08016-08016 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 50.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Moe Hindi		Transaction ID: 30b-21-08018-08018 Date of Disbursement 11 / 07 / 2006	
Mailing Address 132 West 1st Street		Amount of Each Disbursement this Period 50.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Christina Crapanzano		Transaction ID: 30b-21-08022-08022 Date of Disbursement 11 / 07 / 2006	
Mailing Address 75 Tar Lee Place		Amount of Each Disbursement this Period 50.00	
City Staten Island State NY Zip Code 10308	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Rebekah Walker Full Name (Last, First, Middle Initial) Mailing Address 11 Leigh Avenue City Princeton State NJ Zip Code 08542 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08031-08031 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Manuel Cuello Full Name (Last, First, Middle Initial) Mailing Address 411 Denow Rd. City Pennington State NJ Zip Code 08534 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08032-08032 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Katherine Campbell Full Name (Last, First, Middle Initial) Mailing Address 2055 Lawrenceville Road City Lawrenceville State NJ Zip Code 08648 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08033-08033 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sonya Spann		Transaction ID: 30b-21-08038-08038 Date of Disbursement 11 / 07 / 2006	
Mailing Address 186 Lexington Avenue		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Shemea Marshall		Transaction ID: 30b-21-08039-08039 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1300 Asbury Avenue Apt #10		Amount of Each Disbursement this Period 50.00	
City Asbury Park State NJ Zip Code 07712	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Destiny Alexander		Transaction ID: 30b-21-08043-08043 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Katherine Campbell Full Name (Last, First, Middle Initial) Mailing Address 2055 Lawrenceville Road City Lawrenceville State NJ Zip Code 08648 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08045-08045 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Daphne Clausen Full Name (Last, First, Middle Initial) Mailing Address 264 S Liberty St City Hamilton State NJ Zip Code 08629 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08046-08046 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Christina Crapanzano Full Name (Last, First, Middle Initial) Mailing Address 75 Tar Lee Place City Staten Island State NY Zip Code 10308 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08048-08048 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Latrice Cunningham		Transaction ID: 30b-21-08049-08049 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Erin Duffy		Transaction ID: 30b-21-08051-08051 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Terry Oppong		Transaction ID: 30b-21-08056-08056 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1211 Robert Street Floor 1		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lynette Barnes		Transaction ID: 30b-21-08057-08057 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Latrice Cunningham		Transaction ID: 30b-21-08062-08062 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Isaac Mireku		Transaction ID: 30b-21-08066-08066 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Destiny Alexander		Transaction ID: 30b-21-08067-08067 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anne Deus		Transaction ID: 30b-21-08068-08068 Date of Disbursement 11 / 07 / 2006	
Mailing Address 21 Oakmont Court		Amount of Each Disbursement this Period 50.00	
City Lincroft State NJ Zip Code 07738	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Scott Reiersen		Transaction ID: 30b-21-08070-08070 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1 Ruthies Run		Amount of Each Disbursement this Period 50.00	
City West Windsor State NJ Zip Code 08550	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Sarah Gutschow Full Name (Last, First, Middle Initial) Mailing Address 56 Titus Avenue City Lawrenceville State NJ Zip Code 08648 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08071-08071 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Chris Norland Full Name (Last, First, Middle Initial) Mailing Address 3 Stuyvesant Court City East Windsor State NJ Zip Code 08512 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08072-08072 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Kevin Force Full Name (Last, First, Middle Initial) Mailing Address 285 James Street City Teaneck State NJ Zip Code 07666 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08074-08074 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eric Freda		Transaction ID: 30b-21-08075-08075 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 50.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Shemea Marshall		Transaction ID: 30b-21-08080-08080 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1300 Asbury Avenue Apt #10		Amount of Each Disbursement this Period 50.00	
City Asbury Park State NJ Zip Code 07712	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Isaac Mireku		Transaction ID: 30b-21-08081-08081 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 50.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Norris		Transaction ID: 30b-21-08086-08086 Date of Disbursement 11 / 07 / 2006	
Mailing Address 67 Groveland Ave.		Amount of Each Disbursement this Period 50.00	
City Ewing State NJ Zip Code 08638	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Terry Oppong		Transaction ID: 30b-21-08087-08087 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1211 Robert Street Floor 1		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Leah Posner		Transaction ID: 30b-21-08089-08089 Date of Disbursement 11 / 07 / 2006	
Mailing Address 11 Susan Avenue		Amount of Each Disbursement this Period 50.00	
City Marlboro State NJ Zip Code 07746	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rachel Posner		Transaction ID: 30b-21-08090-08090 Date of Disbursement 11 / 07 / 2006	
Mailing Address 11 Susan Avenue		Amount of Each Disbursement this Period 50.00	
City Marlboro State NJ Zip Code 07746	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Scott Reiersen		Transaction ID: 30b-21-08091-08091 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1 Ruthies Run		Amount of Each Disbursement this Period 50.00	
City West Windsor State NJ Zip Code 08550	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dorsa Seima		Transaction ID: 30b-21-08095-08095 Date of Disbursement 11 / 07 / 2006	
Mailing Address 928 West 6th Street		Amount of Each Disbursement this Period 50.00	
City Plainfield State NJ Zip Code 07060	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Rebekah Walker Full Name (Last, First, Middle Initial) Mailing Address 11 Leigh Avenue City Princeton State NJ Zip Code 08542 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08096-08096 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Krystal Wilkie Full Name (Last, First, Middle Initial) Mailing Address 7 Hemlock Lane City Bayville State NJ Zip Code 08721 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08097-08097 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Tashesia Wilson Full Name (Last, First, Middle Initial) Mailing Address 1205 Heck Avenue City Neptune State NJ Zip Code 07753 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08098-08098 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Zimbaldi		Transaction ID: 30b-21-08100-08100 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1584 Pennington Road		Amount of Each Disbursement this Period 50.00
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Austria Cuevas		Transaction ID: 30b-21-08113-08113 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 507 Brace Avenue		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Genina Jimenez		Transaction ID: 30b-21-08114-08114 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 618 Hanson Avenue		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andrea Lavalle		Transaction ID: 30b-21-08116-08116 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 115 Brighton Avenue Apt. 4		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Miguel Lavalle		Transaction ID: 30b-21-08117-08117 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 115 Brighton Avenue, Apt. 4		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Nataly Lavalle		Transaction ID: 30b-21-08118-08118 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 115 Brighton Ave., Apt. 4		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Susana Hernandez		Transaction ID: 30b-21-08119-08119 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 115 Brighton Avenue Apartment 4		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Reymundo Menes		Transaction ID: 30b-21-08120-08120 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jose Batista		Transaction ID: 30b-21-08122-08122 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 650 Katherine Avenue		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08865	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eduardo Ayala		Transaction ID: 30b-21-08123-08123 Date of Disbursement 11 / 07 / 2006
Mailing Address 23 Dino Drive		Amount of Each Disbursement this Period 50.00
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jose Abreu		Transaction ID: 30b-21-08125-08125 Date of Disbursement 11 / 07 / 2006
Mailing Address 450 Division, 2nd Floor		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Magdalena Vasquez		Transaction ID: 30b-21-08127-08127 Date of Disbursement 11 / 07 / 2006
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gilberta Menes		Transaction ID: 30b-21-08128-08128 Date of Disbursement 11 / 07 / 2006	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rufina Perez		Transaction ID: 30b-21-08129-08129 Date of Disbursement 11 / 07 / 2006	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jesus Castillo		Transaction ID: 30b-21-08130-08130 Date of Disbursement 11 / 07 / 2006	
Mailing Address 61 Kendall Drive		Amount of Each Disbursement this Period 50.00	
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jesus Castillo Full Name (Last, First, Middle Initial) Mailing Address 61 Kendall Drive City Parlin State NJ Zip Code 08859 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08132-08132 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Eduardo Ayala Full Name (Last, First, Middle Initial) Mailing Address 23 Dino Drive City Keasbey State NJ Zip Code 08832 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08133-08133 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. July J. Davila Full Name (Last, First, Middle Initial) Mailing Address 37 Kendall Drive City Parlin State NJ Zip Code 08859 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08135-08135 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Magdalena Vasquez		Transaction ID: 30b-21-08138-08138 Date of Disbursement 11 / 07 / 2006
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jose Batista		Transaction ID: 30b-21-08140-08140 Date of Disbursement 11 / 07 / 2006
Mailing Address 650 Katherine Avenue		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08865	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Genina Jimenez		Transaction ID: 30b-21-08141-08141 Date of Disbursement 11 / 07 / 2006
Mailing Address 618 Hanson Avenue		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Miguel Lavalle</p>		<p>Transaction ID: 30b-21-08142-08142 Date of Disbursement</p>	
<p>Mailing Address 115 Brighton Avenue, Apt. 4</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City Perth Amboy</p>	<p>State NJ</p>	<p>Zip Code 08861</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text"/></p>	<p><input type="text" value="50.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Susana Hernandez</p>		<p>Transaction ID: 30b-21-08144-08144 Date of Disbursement</p>	
<p>Mailing Address 115 Brighton Avenue Apartment 4</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City Perth Amboy</p>	<p>State NJ</p>	<p>Zip Code 08861</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text"/></p>	<p><input type="text" value="50.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Nataly Lavalle</p>		<p>Transaction ID: 30b-21-08145-08145 Date of Disbursement</p>	
<p>Mailing Address 115 Brighton Ave., Apt. 4</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City Perth Amboy</p>	<p>State NJ</p>	<p>Zip Code 08861</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text"/></p>	<p><input type="text" value="50.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andrea Lavallo		Transaction ID: 30b-21-08146-08146 Date of Disbursement 11 / 07 / 2006	
Mailing Address 115 Brighton Avenue Apt. 4		Amount of Each Disbursement this Period 50.00	
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gilberta Menes		Transaction ID: 30b-21-08148-08148 Date of Disbursement 11 / 07 / 2006	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Austria Cuevas		Transaction ID: 30b-21-08150-08150 Date of Disbursement 11 / 07 / 2006	
Mailing Address 507 Brace Avenue		Amount of Each Disbursement this Period 50.00	
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Susana Hernandez Full Name (Last, First, Middle Initial) Mailing Address 115 Brighton Avenue Apartment 4 City Perth Amboy State NJ Zip Code 08861 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08162-08162 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Miguel Lavalle Full Name (Last, First, Middle Initial) Mailing Address 115 Brighton Avenue, Apt. 4 City Perth Amboy State NJ Zip Code 08861 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08163-08163 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Jose Trinidad Full Name (Last, First, Middle Initial) Mailing Address 621 20th Avenue City Paterson State NJ Zip Code 07504 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08165-08165 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gilberta Menes		Transaction ID: 30b-21-08166-08166 Date of Disbursement 11 / 07 / 2006	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Magdalena Vasquez		Transaction ID: 30b-21-08167-08167 Date of Disbursement 11 / 07 / 2006	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Genina Jimenez		Transaction ID: 30b-21-08169-08169 Date of Disbursement 11 / 07 / 2006	
Mailing Address 618 Hanson Avenue		Amount of Each Disbursement this Period 50.00	
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1109 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Austria Cuevas		Transaction ID: 30b-21-08176-08176 Date of Disbursement 11 / 07 / 2006
Mailing Address 507 Brace Avenue		Amount of Each Disbursement this Period 50.00
City Perth Amboy	State NJ Zip Code 08861	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jesus Castillo		Transaction ID: 30b-21-08177-08177 Date of Disbursement 11 / 07 / 2006
Mailing Address 61 Kendall Drive		Amount of Each Disbursement this Period 50.00
City Parlin	State NJ Zip Code 08859	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. July J. Davila		Transaction ID: 30b-21-08179-08179 Date of Disbursement 11 / 07 / 2006
Mailing Address 37 Kendall Drive		Amount of Each Disbursement this Period 50.00
City Parlin	State NJ Zip Code 08859	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eduardo Ayala		Transaction ID: 30b-21-08184-08184 Date of Disbursement 11 / 07 / 2006
Mailing Address 23 Dino Drive		Amount of Each Disbursement this Period 50.00
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jose Batista		Transaction ID: 30b-21-08195-08195 Date of Disbursement 11 / 07 / 2006
Mailing Address 650 Katherine Avenue		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08865	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Marbey Barcenas		Transaction ID: 30b-21-08197-08197 Date of Disbursement 11 / 07 / 2006
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1111 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marbey Barcenas		Transaction ID: 30b-21-08198-08198 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marbey Barcenas		Transaction ID: 30b-21-08199-08199 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Marbey Barcenas		Transaction ID: 30b-21-08200-08200 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marbey Barcenas		Transaction ID: 30b-21-08201-08201 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marbey Barcenas		Transaction ID: 30b-21-08202-08202 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melvi Davila		Transaction ID: 30b-21-08203-08203 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melvi Davila		Transaction ID: 30b-21-08204-08204 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Melvi Davila		Transaction ID: 30b-21-08205-08205 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Melvi Davila		Transaction ID: 30b-21-08206-08206 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1114 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melvi Davila		Transaction ID: 30b-21-08207-08207 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Melvi Davila		Transaction ID: 30b-21-08208-08208 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jacqueline Lacayo		Transaction ID: 30b-21-08209-08209 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 251 Fulton Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1115 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jacqueline Lacayo		Transaction ID: 30b-21-08210-08210 Date of Disbursement <input type="text" value="11"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="06"/>
Mailing Address 251 Fulton Street		Amount of Each Disbursement this Period <input type="text" value="50.00"/>
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	<input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Jacqueline Lacayo		Transaction ID: 30b-21-08211-08211 Date of Disbursement <input type="text" value="11"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="06"/>
Mailing Address 251 Fulton Street		Amount of Each Disbursement this Period <input type="text" value="50.00"/>
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	<input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Jacqueline Lacayo		Transaction ID: 30b-21-08212-08212 Date of Disbursement <input type="text" value="11"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="06"/>
Mailing Address 251 Fulton Street		Amount of Each Disbursement this Period <input type="text" value="50.00"/>
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	<input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Jacqueline Lacayo</p>		<p>Transaction ID: 30b-21-08213-08213 Date of Disbursement</p>	
<p>Mailing Address 251 Fulton Street</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City New Brunswick</p>	<p>State NJ</p>	<p>Amount of Each Disbursement this Period</p>	
<p>Zip Code 08901</p>		<p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text"/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Jacqueline Lacayo</p>		<p>Transaction ID: 30b-21-08214-08214 Date of Disbursement</p>	
<p>Mailing Address 251 Fulton Street</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City New Brunswick</p>	<p>State NJ</p>	<p>Amount of Each Disbursement this Period</p>	
<p>Zip Code 08901</p>		<p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text"/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Jose Batista</p>		<p>Transaction ID: 30b-21-08216-08216 Date of Disbursement</p>	
<p>Mailing Address 650 Katherine Avenue</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City Perth Amboy</p>	<p>State NJ</p>	<p>Amount of Each Disbursement this Period</p>	
<p>Zip Code 08865</p>		<p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text"/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eduardo Ayala		Transaction ID: 30b-21-08218-08218 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 23 Dino Drive		Amount of Each Disbursement this Period 50.00	
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Matthew Croker		Transaction ID: 30b-21-08228-08228 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 769 Pequest Road		Amount of Each Disbursement this Period 50.00	
City Oxford State NJ Zip Code 07863	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Justin Dooley		Transaction ID: 30b-21-08229-08229 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 3 Greenbriar Lane		Amount of Each Disbursement this Period 50.00	
City Perrineville State NJ Zip Code 08535	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Rachel Elfenbein</p>		<p>Transaction ID: 30b-21-08231-08231 Date of Disbursement</p>	
<p>Mailing Address 20 Loweland Drive</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City State Zip Code Mountain Lakes NJ 07046</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Leigh Ann Testa</p>		<p>Transaction ID: 30b-21-08239-08239 Date of Disbursement</p>	
<p>Mailing Address 11 West Alton Place</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City State Zip Code Old Bridge NJ 08857</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Nick Brener</p>		<p>Transaction ID: 30b-21-08240-08240 Date of Disbursement</p>	
<p>Mailing Address 118 Huntington Street</p>		<p><input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p>	
<p>City State Zip Code New Brunswick NJ 08901</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Darren Drake Full Name (Last, First, Middle Initial) Mailing Address 323 Hoffman Avenue City New Milford State NJ Zip Code 07646 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08243-08243 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Dave Hamell Full Name (Last, First, Middle Initial) Mailing Address 46 Union Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08245-08245 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Mirnes Karcic Full Name (Last, First, Middle Initial) Mailing Address 483 Colonial Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08246-08246 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) John Prignano		Transaction ID: 30b-21-08251-08251 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Alexander Winters		Transaction ID: 30b-21-08254-08254 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 53 Locust Grove		Amount of Each Disbursement this Period 50.00
City Hazlet State NJ Zip Code 07730	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Vishal Kachhadia		Transaction ID: 30b-21-08261-08261 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 125 George Road		Amount of Each Disbursement this Period 50.00
City Emerson State NJ Zip Code 07630	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Thomas Mendez		Transaction ID: 30b-21-08262-08262 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 1 Springdale Rd.		Amount of Each Disbursement this Period 50.00	
City Kendall Park State NJ Zip Code 08824	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tiana Tucker		Transaction ID: 30b-21-08266-08266 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 30 Hana Road		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dominic Mangonon		Transaction ID: 30b-21-08272-08272 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 93 Easton Avenue Apartment 1		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jorge Tapia		Transaction ID: 30b-21-08276-08276 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3 Park Place		Amount of Each Disbursement this Period 50.00	
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Stanley Gumbs		Transaction ID: 30b-21-08280-08280 Date of Disbursement 11 / 07 / 2006	
Mailing Address 701 Leland Avenue		Amount of Each Disbursement this Period 50.00	
City Plainfield State NJ Zip Code 07063	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Morgan		Transaction ID: 30b-21-08286-08286 Date of Disbursement 11 / 07 / 2006	
Mailing Address 120 Cambridge Avenue		Amount of Each Disbursement this Period 50.00	
City Plainfield State NJ Zip Code 07062	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Darcele Frederique</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 25659 DPO Way</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08299-08299</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Abdul Glover</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 20 Abeel Street</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08300-08300</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Davion Gomez</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 107 Vaughan Drive</p> <p>City Newark State NJ Zip Code 07103</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08301-08301</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brenda Hoffman		Transaction ID: 30b-21-08302-08302 Date of Disbursement 11 / 07 / 2006	
Mailing Address 70 Mine Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Gabriel Valdes		Transaction ID: 30b-21-08307-08307 Date of Disbursement 11 / 07 / 2006	
Mailing Address 264 Conen Street		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Yin Chu		Transaction ID: 30b-21-08308-08308 Date of Disbursement 11 / 07 / 2006	
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 50.00	
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Roland Englis</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 37 Agatha Drive</p> <p>City Edison State NJ Zip Code 08817</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08309-08309</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Amanda Franken</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 33 Siltes Road</p> <p>City Edison State NJ Zip Code 08817</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08310-08310</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Lotanna Onuekwusi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 369 Park Avenue Apt. E 18</p> <p>City Orange State NJ Zip Code 07050</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08315-08315</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christian Rocha		Transaction ID: 30b-21-08316-08316 Date of Disbursement 11 / 07 / 2006
Mailing Address 36 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tanya Santiago		Transaction ID: 30b-21-08317-08317 Date of Disbursement 11 / 07 / 2006
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 50.00
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Oba Simmonds		Transaction ID: 30b-21-08318-08318 Date of Disbursement 11 / 07 / 2006
Mailing Address 88 Freemont Court		Amount of Each Disbursement this Period 50.00
City Somerset State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ebony Williams		Transaction ID: 30b-21-08321-08321 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 40 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Oyediron Adelokun		Transaction ID: 30b-21-08322-08322 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 8 Village Gate Road		Amount of Each Disbursement this Period 50.00
City Washington State NJ Zip Code 07882	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Darcele Frederique		Transaction ID: 30b-21-08325-08325 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 25659 DPO Way		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Abdul Glover		Transaction ID: 30b-21-08326-08326 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jessica Lopez		Transaction ID: 30b-21-08327-08327 Date of Disbursement 11 / 07 / 2006	
Mailing Address 30766 RPO Way		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Yunika Peguero		Transaction ID: 30b-21-08330-08330 Date of Disbursement 11 / 07 / 2006	
Mailing Address 288 Hall Avenue Apartment 11		Amount of Each Disbursement this Period 50.00	
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yohany Reyes		Transaction ID: 30b-21-08345-08345 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 560 Palisade Avenue		Amount of Each Disbursement this Period 50.00
City Cliffsides Park State NJ Zip Code 07010	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Eric Wildenberg		Transaction ID: 30b-21-08348-08348 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 33997 RPO Way		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Yin Chu		Transaction ID: 30b-21-08350-08350 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 50.00
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Justin Dooley Full Name (Last, First, Middle Initial) Mailing Address 3 Greenbriar Lane City Perrineville State NJ Zip Code 08535 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08351-08351 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Roland Englis Full Name (Last, First, Middle Initial) Mailing Address 37 Agatha Drive City Edison State NJ Zip Code 08817 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08352-08352 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Robert Estor Full Name (Last, First, Middle Initial) Mailing Address 43 Wellington Road City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08353-08353 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Amanda Franken		Transaction ID: 30b-21-08354-08354 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 33 Siltes Road		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Aaron Forrest		Transaction ID: 30b-21-08355-08355 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 233 Bradford St		Amount of Each Disbursement this Period 50.00
City Everett State MA Zip Code 02149	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Adelbambo Ogunfowora		Transaction ID: 30b-21-08362-08362 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 941 Beatrice Parkway		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Croker		Transaction ID: 30b-21-08367-08367 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 769 Pequest Road		Amount of Each Disbursement this Period 50.00
City Oxford State NJ Zip Code 07863	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rachel Elfenbein		Transaction ID: 30b-21-08368-08368 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Loweland Drive		Amount of Each Disbursement this Period 50.00
City Mountain Lakes State NJ Zip Code 07046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Davion Gomez		Transaction ID: 30b-21-08369-08369 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 107 Vaughan Drive		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mirnes Karcic		Transaction ID: 30b-21-08373-08373 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 483 Colonial Avenue		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jung Kim		Transaction ID: 30b-21-08374-08374 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 Brookfield Way		Amount of Each Disbursement this Period 50.00
City Westminster State NJ Zip Code 08550	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. John Prignano		Transaction ID: 30b-21-08375-08375 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Oba Simmonds		Transaction ID: 30b-21-08376-08376 Date of Disbursement 11 / 07 / 2006
Mailing Address 88 Freemont Court		Amount of Each Disbursement this Period 50.00
City Somerset State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gary Feng		Transaction ID: 30b-21-08379-08379 Date of Disbursement 11 / 07 / 2006
Mailing Address 15 Rutledge Court		Amount of Each Disbursement this Period 50.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Yasaswi Vishnubhotla		Transaction ID: 30b-21-08387-08387 Date of Disbursement 11 / 07 / 2006
Mailing Address 145 Taylor Avenue Apartment B		Amount of Each Disbursement this Period 50.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dawn Ambrose		Transaction ID: 30b-21-08388-08388	
Mailing Address 3111 Birchwood Court		Date of Disbursement 11 / 07 / 2006	
City North Brunswick	State NJ	Zip Code 08902	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Darren Drake		Transaction ID: 30b-21-08391-08391	
Mailing Address 323 Hoffman Avenue		Date of Disbursement 11 / 07 / 2006	
City New Milford	State NJ	Zip Code 07646	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Drew Worthington		Transaction ID: 30b-21-08401-08401	
Mailing Address 35 Forest Glen Drive		Date of Disbursement 11 / 07 / 2006	
City Highland Park	State NJ	Zip Code 08904	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gary Varjian		Transaction ID: 30b-21-08402-08402 Date of Disbursement 11 / 07 / 2006	
Mailing Address 13 Wield Court		Amount of Each Disbursement this Period 50.00	
City Park Ridge State NJ Zip Code 07656	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Deyra Diril		Transaction ID: 30b-21-08403-08403 Date of Disbursement 11 / 07 / 2006	
Mailing Address 5 Dana Circle		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Stanley Gumbs		Transaction ID: 30b-21-08404-08404 Date of Disbursement 11 / 07 / 2006	
Mailing Address 701 Leland Avenue		Amount of Each Disbursement this Period 50.00	
City Plainfield State NJ Zip Code 07063	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Dominic Mangonon</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 93 Easton Avenue Apartment 1</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08408-08408</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Michael Morgan</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 120 Cambridge Avenue</p> <p>City Plainfield State NJ Zip Code 07062</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08409-08409</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Lotanna Onuekwusi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 369 Park Avenue Apt. E 18</p> <p>City Orange State NJ Zip Code 07050</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08410-08410</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Keyenza Seawright</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 97 Delavan Street</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08412-08412</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>B. April Shivery</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 62 Handy Street Apartment 8</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08414-08414</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>C. John Ball</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 68 Park Avenue Apt. 405</p> <p>City Bloomfield State NJ Zip Code 07003</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-08415-08415</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kandon Burton		Transaction ID: 30b-21-08416-08416 Date of Disbursement 11 / 07 / 2006
Mailing Address 36 Ampere Parkway		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Darren Drake		Transaction ID: 30b-21-08417-08417 Date of Disbursement 11 / 07 / 2006
Mailing Address 323 Hoffman Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jessica Lopez		Transaction ID: 30b-21-08421-08421 Date of Disbursement 11 / 07 / 2006
Mailing Address 30766 RPO Way		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1140 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mirnes Karcic		Transaction ID: 30b-21-08423-08423 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 483 Colonial Avenue		Amount of Each Disbursement this Period 50.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Oyediron Adelokun		Transaction ID: 30b-21-08426-08426 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 8 Village Gate Road		Amount of Each Disbursement this Period 50.00
City Washington State NJ Zip Code 07882	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mara Villanueva		Transaction ID: 30b-21-08428-08428 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 Crossgate Road		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1141 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juanita Warde Full Name (Last, First, Middle Initial) Mailing Address 266 Easter Parkway City Newark State NJ Zip Code 07106 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08429-08429 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Drew Worthington Full Name (Last, First, Middle Initial) Mailing Address 35 Forest Glen Drive City Highland Park State NJ Zip Code 08904 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08430-08430 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Tim Chen Full Name (Last, First, Middle Initial) Mailing Address 32250 Rpo Way City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08432-08432 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1142 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yin Chu		Transaction ID: 30b-21-08433-08433 Date of Disbursement 11 / 07 / 2006	
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 50.00	
City Ridgewood	State NJ	Zip Code 07450	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Roland Englis		Transaction ID: 30b-21-08435-08435 Date of Disbursement 11 / 07 / 2006	
Mailing Address 37 Agatha Drive		Amount of Each Disbursement this Period 50.00	
City Edison	State NJ	Zip Code 08817	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Ian Forrester		Transaction ID: 30b-21-08436-08436 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1769 West 5th		Amount of Each Disbursement this Period 50.00	
City Piscataway	State NJ	Zip Code 08854	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1143 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Abdul Glover		Transaction ID: 30b-21-08438-08438 Date of Disbursement 11 / 07 / 2006
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Dominic Mangonon		Transaction ID: 30b-21-08440-08440 Date of Disbursement 11 / 07 / 2006
Mailing Address 93 Easton Avenue Apartment 1		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Justin Alsbrook		Transaction ID: 30b-21-08446-08446 Date of Disbursement 11 / 07 / 2006
Mailing Address 7 Third Avenue		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1144 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Davion Gomez		Transaction ID: 30b-21-08451-08451 Date of Disbursement 11 / 07 / 2006
Mailing Address 107 Vaughan Drive		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lotanna Onuekwusi		Transaction ID: 30b-21-08456-08456 Date of Disbursement 11 / 07 / 2006
Mailing Address 369 Park Avenue Apt. E 18		Amount of Each Disbursement this Period 50.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Oba Simmonds		Transaction ID: 30b-21-08457-08457 Date of Disbursement 11 / 07 / 2006
Mailing Address 88 Freemont Court		Amount of Each Disbursement this Period 50.00
City Somerset State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stanley Gumbs		Transaction ID: 30b-21-08461-08461 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 701 Leland Avenue		Amount of Each Disbursement this Period 50.00
City Plainfield State NJ Zip Code 07063	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael Morgan		Transaction ID: 30b-21-08464-08464 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 120 Cambridge Avenue		Amount of Each Disbursement this Period 50.00
City Plainfield State NJ Zip Code 07062	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. John Prignano		Transaction ID: 30b-21-08468-08468 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tanya Santiago		Transaction ID: 30b-21-08470-08470 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 50.00
City Somerset State NJ Zip Code 08873		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sarab Thapar		Transaction ID: 30b-21-08471-08471 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 63 Rosemont Terrace		Amount of Each Disbursement this Period 50.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ebony Williams		Transaction ID: 30b-21-08472-08472 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 40 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dawn Ambrose		Transaction ID: 30b-21-08473-08473 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3111 Birchwood Court		Amount of Each Disbursement this Period 50.00
City North Brunswick State NJ Zip Code 08902	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Latoya Cromwell		Transaction ID: 30b-21-08474-08474 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 290 George Street Apartment 904		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Robert Estor		Transaction ID: 30b-21-08476-08476 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 43 Wellington Road		Amount of Each Disbursement this Period 50.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dimitri Giannios		Transaction ID: 30b-21-08477-08477 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3 Ireland Brook Drive		Amount of Each Disbursement this Period 50.00	
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Vishal Kachhadia		Transaction ID: 30b-21-08479-08479 Date of Disbursement 11 / 07 / 2006	
Mailing Address 125 George Road		Amount of Each Disbursement this Period 50.00	
City Emerson State NJ Zip Code 07630	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thomas Mendez		Transaction ID: 30b-21-08480-08480 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1 Springdale Rd.		Amount of Each Disbursement this Period 50.00	
City Kendall Park State NJ Zip Code 08824	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yohany Reyes		Transaction ID: 30b-21-08483-08483 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 560 Palisade Avenue		Amount of Each Disbursement this Period 50.00
City Cliffsides Park State NJ Zip Code 07010		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Matthew Croker		Transaction ID: 30b-21-08487-08487 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 769 Pequest Road		Amount of Each Disbursement this Period 50.00
City Oxford State NJ Zip Code 07863		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Justin Dooley		Transaction ID: 30b-21-08488-08488 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Greenbriar Lane		Amount of Each Disbursement this Period 50.00
City Perrineville State NJ Zip Code 08535		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rachel Elfenbein		Transaction ID: 30b-21-08489-08489 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Loweland Drive		Amount of Each Disbursement this Period 50.00	
City Mountain Lakes State NJ Zip Code 07046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amanda Franken		Transaction ID: 30b-21-08490-08490 Date of Disbursement 11 / 07 / 2006	
Mailing Address 33 Siltes Road		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Erik Gupp		Transaction ID: 30b-21-08491-08491 Date of Disbursement 11 / 07 / 2006	
Mailing Address 42940 Brookridge Court		Amount of Each Disbursement this Period 50.00	
City Leesburg State VA Zip Code 20176	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nathaniel Kostar		Transaction ID: 30b-21-08492-08492 Date of Disbursement 11 / 07 / 2006
Mailing Address 83 Richardson Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gary Feng		Transaction ID: 30b-21-08502-08502 Date of Disbursement 11 / 07 / 2006
Mailing Address 15 Rutledge Court		Amount of Each Disbursement this Period 50.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mary Klimik		Transaction ID: 30b-21-08504-08504 Date of Disbursement 11 / 07 / 2006
Mailing Address PO Box 5478		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08903	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jasmine Lyons		Transaction ID: 30b-21-08506-08506 Date of Disbursement 11 / 07 / 2006	
Mailing Address 174 Fultonst		Amount of Each Disbursement this Period 50.00	
City New Brunswick	State NJ	Zip Code 08901	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christian Rocha		Transaction ID: 30b-21-08509-08509 Date of Disbursement 11 / 07 / 2006	
Mailing Address 36 Quentin Avenue		Amount of Each Disbursement this Period 50.00	
City New Brunswick	State NJ	Zip Code 08901	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael Anis		Transaction ID: 30b-21-08516-08516 Date of Disbursement 11 / 07 / 2006	
Mailing Address 45 Lahiere Avenue		Amount of Each Disbursement this Period 50.00	
City Edison	State NJ	Zip Code 08817	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Anis		Transaction ID: 30b-21-08517-08517 Date of Disbursement 11 / 07 / 2006	
Mailing Address 45 Lahiere Avenue		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Anis		Transaction ID: 30b-21-08518-08518 Date of Disbursement 11 / 07 / 2006	
Mailing Address 45 Lahiere Avenue		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Anis		Transaction ID: 30b-21-08519-08519 Date of Disbursement 11 / 07 / 2006	
Mailing Address 45 Lahiere Avenue		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Oyediron Adelakun Full Name (Last, First, Middle Initial) Mailing Address 8 Village Gate Road City Washington State NJ Zip Code 07882 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08540-08540 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Justin Alsbrook Full Name (Last, First, Middle Initial) Mailing Address 7 Third Avenue City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08541-08541 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Marlo Diaz Full Name (Last, First, Middle Initial) Mailing Address 65 Pennsylvania Way City North Brunswick State NJ Zip Code 08902 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08545-08545 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Klimik		Transaction ID: 30b-21-08549-08549 Date of Disbursement 11 / 07 / 2006	
Mailing Address PO Box 5478		Amount of Each Disbursement this Period 50.00	
City New Brunswick	State NJ	Zip Code 08903	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Matthew Rivera		Transaction ID: 30b-21-08551-08551 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1465 Thomas Avenue		Amount of Each Disbursement this Period 50.00	
City North Brunswick	State NJ	Zip Code 08902	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Deyra Diril		Transaction ID: 30b-21-08554-08554 Date of Disbursement 11 / 07 / 2006	
Mailing Address 5 Dana Circle		Amount of Each Disbursement this Period 50.00	
City Edison	State NJ	Zip Code 08820	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Justin Dooley		Transaction ID: 30b-21-08555-08555 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Greenbriar Lane		Amount of Each Disbursement this Period 50.00
City Perrineville State NJ Zip Code 08535	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Aaron Forrest		Transaction ID: 30b-21-08557-08557 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 233 Bradford St		Amount of Each Disbursement this Period 50.00
City Everett State MA Zip Code 02149	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Lotanna Onuekwusi		Transaction ID: 30b-21-08562-08562 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 369 Park Avenue Apt. E 18		Amount of Each Disbursement this Period 50.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keyenza Seawright		Transaction ID: 30b-21-08564-08564 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 97 Delavan Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tarik Seawright		Transaction ID: 30b-21-08565-08565 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 97 Delavan Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. April Shivery		Transaction ID: 30b-21-08566-08566 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 62 Handy Street Apartment 8		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. John Ball		Transaction ID: 30b-21-08569-08569 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 68 Park Avenue Apt. 405		Amount of Each Disbursement this Period 50.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Nick Brener		Transaction ID: 30b-21-08570-08570 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Yin Chu		Transaction ID: 30b-21-08572-08572 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 50.00
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Croker		Transaction ID: 30b-21-08573-08573 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 769 Pequest Road		Amount of Each Disbursement this Period 50.00
City Oxford State NJ Zip Code 07863	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rachel Elfenbein		Transaction ID: 30b-21-08574-08574 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Loweland Drive		Amount of Each Disbursement this Period 50.00
City Mountain Lakes State NJ Zip Code 07046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Roland Englis		Transaction ID: 30b-21-08575-08575 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 37 Agatha Drive		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Amanda Franken		Transaction ID: 30b-21-08576-08576 Date of Disbursement 11 / 07 / 2006
Mailing Address 33 Siltes Road		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jessica Lopez		Transaction ID: 30b-21-08577-08577 Date of Disbursement 11 / 07 / 2006
Mailing Address 30766 RPO Way		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kelvin Pena		Transaction ID: 30b-21-08580-08580 Date of Disbursement 11 / 07 / 2006
Mailing Address 357 Halladay Street		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. John Prignano		Transaction ID: 30b-21-08581-08581 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christian Rocha		Transaction ID: 30b-21-08582-08582 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Vernee Brooks		Transaction ID: 30b-21-08584-08584 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Roosevelt Avenue Apartment T2		Amount of Each Disbursement this Period 50.00
City Carteret State NJ Zip Code 07008		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Ian Forrester		Transaction ID: 30b-21-08586-08586 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1769 West 5th		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Abdul Glover		Transaction ID: 30b-21-08588-08588 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Davion Gomez		Transaction ID: 30b-21-08590-08590 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 107 Vaughan Drive		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stanley Gumbs		Transaction ID: 30b-21-08591-08591 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 701 Leland Avenue		Amount of Each Disbursement this Period 50.00
City Plainfield State NJ Zip Code 07063	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Morgan		Transaction ID: 30b-21-08593-08593 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 120 Cambridge Avenue		Amount of Each Disbursement this Period 50.00
City Plainfield State NJ Zip Code 07062	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tim Chen		Transaction ID: 30b-21-08601-08601 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 32250 Rpo Way		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juanita Warde Full Name (Last, First, Middle Initial) Mailing Address 266 Easter Parkway City Newark State NJ Zip Code 07106 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08610-08610 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Justin Alsbrook Full Name (Last, First, Middle Initial) Mailing Address 7 Third Avenue City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08612-08612 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Gary Feng Full Name (Last, First, Middle Initial) Mailing Address 15 Rutledge Court City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08615-08615 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Ian Forrester		Transaction ID: 30b-21-08616-08616 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1769 West 5th		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Mary Klimik		Transaction ID: 30b-21-08617-08617 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address PO Box 5478		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08903	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Eric Wildenberg		Transaction ID: 30b-21-08623-08623 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 33997 RPO Way		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yin Chu		Transaction ID: 30b-21-08625-08625 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 50.00	
City Ridgewood	State NJ	Zip Code 07450	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Marlo Diaz		Transaction ID: 30b-21-08627-08627 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 65 Pennsylvania Way		Amount of Each Disbursement this Period 50.00	
City North Brunswick	State NJ	Zip Code 08902	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Deyra Diril		Transaction ID: 30b-21-08628-08628 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 5 Dana Circle		Amount of Each Disbursement this Period 50.00	
City Edison	State NJ	Zip Code 08820	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Justin Dooley		Transaction ID: 30b-21-08629-08629 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Greenbriar Lane		Amount of Each Disbursement this Period 50.00
City Perrineville State NJ Zip Code 08535	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Roland Englis		Transaction ID: 30b-21-08631-08631 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 37 Agatha Drive		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Erik Gupp		Transaction ID: 30b-21-08634-08634 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 42940 Brookridge Court		Amount of Each Disbursement this Period 50.00
City Leesburg State VA Zip Code 20176	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aaron Forrest		Transaction ID: 30b-21-08635-08635 Date of Disbursement 11 / 07 / 2006	
Mailing Address 233 Bradford St		Amount of Each Disbursement this Period 50.00	
City Everett State MA Zip Code 02149	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tiffany Jenkins		Transaction ID: 30b-21-08637-08637 Date of Disbursement 11 / 07 / 2006	
Mailing Address 18 Van Ness Court		Amount of Each Disbursement this Period 50.00	
City Maplewood State NJ Zip Code 07040	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Matthew Rivera		Transaction ID: 30b-21-08638-08638 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1465 Thomas Avenue		Amount of Each Disbursement this Period 50.00	
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dawn Ambrose		Transaction ID: 30b-21-08640-08640	
Mailing Address 3111 Birchwood Court		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City North Brunswick	State NJ	Zip Code 08902	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Robert Estor		Transaction ID: 30b-21-08642-08642	
Mailing Address 43 Wellington Road		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City East Brunswick	State NJ	Zip Code 08816	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Amanda Franken		Transaction ID: 30b-21-08643-08643	
Mailing Address 33 Siltes Road		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
City Edison	State NJ	Zip Code 08817	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Field Consulting Services		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Davion Gomez		Transaction ID: 30b-21-08644-08644 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 107 Vaughan Drive		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07103		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dominic Mangonon		Transaction ID: 30b-21-08647-08647 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 93 Easton Avenue Apartment 1		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Adelbambo Ogunfowora		Transaction ID: 30b-21-08649-08649 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 941 Beatrice Parkway		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08820		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lotanna Onuekwusi Full Name (Last, First, Middle Initial) Mailing Address 369 Park Avenue Apt. E 18 City Orange State NJ Zip Code 07050 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08650-08650 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Gabriel Valdes Full Name (Last, First, Middle Initial) Mailing Address 264 Conen Street City Edison State NJ Zip Code 08820 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08653-08653 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Andre Childs Full Name (Last, First, Middle Initial) Mailing Address 382 Dryden City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08657-08657 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

150.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maurice Johnson		Transaction ID: 30b-21-08661-08661 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1669 Norris Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jasmine Lyons		Transaction ID: 30b-21-08662-08662 Date of Disbursement 11 / 07 / 2006	
Mailing Address 174 Fultonst		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tiana Tucker		Transaction ID: 30b-21-08665-08665 Date of Disbursement 11 / 07 / 2006	
Mailing Address 30 Hana Road		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Oyediron Adelakun Full Name (Last, First, Middle Initial) Mailing Address 8 Village Gate Road City Washington State NJ Zip Code 07882 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08668-08668 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. John Ball Full Name (Last, First, Middle Initial) Mailing Address 68 Park Avenue Apt. 405 City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08669-08669 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Nick Brener Full Name (Last, First, Middle Initial) Mailing Address 118 Huntington Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08670-08670 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Croker		Transaction ID: 30b-21-08672-08672 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 769 Pequest Road		Amount of Each Disbursement this Period 50.00
City Oxford State NJ Zip Code 07863	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rachel Elfenbein		Transaction ID: 30b-21-08673-08673 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Loweland Drive		Amount of Each Disbursement this Period 50.00
City Mountain Lakes State NJ Zip Code 07046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Andres Guevara		Transaction ID: 30b-21-08675-08675 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 441 76th Street Apartment B7		Amount of Each Disbursement this Period 50.00
City North Bergen State NJ Zip Code 07047	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Lopez		Transaction ID: 30b-21-08679-08679 Date of Disbursement 11 / 07 / 2006	
Mailing Address 30766 RPO Way		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. John Prignano		Transaction ID: 30b-21-08680-08680 Date of Disbursement 11 / 07 / 2006	
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mara Villanueva		Transaction ID: 30b-21-08682-08682 Date of Disbursement 11 / 07 / 2006	
Mailing Address 14 Crossgate Road		Amount of Each Disbursement this Period 50.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Abdul Glover		Transaction ID: 30b-21-08684-08684 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Stanley Gumbs		Transaction ID: 30b-21-08685-08685 Date of Disbursement 11 / 07 / 2006	
Mailing Address 701 Leland Avenue		Amount of Each Disbursement this Period 50.00	
City Plainfield State NJ Zip Code 07063	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vishal Kachhadia		Transaction ID: 30b-21-08686-08686 Date of Disbursement 11 / 07 / 2006	
Mailing Address 125 George Road		Amount of Each Disbursement this Period 50.00	
City Emerson State NJ Zip Code 07630	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1177 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Morgan		Transaction ID: 30b-21-08689-08689 Date of Disbursement 11 / 07 / 2006	
Mailing Address 120 Cambridge Avenue		Amount of Each Disbursement this Period 50.00	
City Plainfield State NJ Zip Code 07062	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. April Shivery		Transaction ID: 30b-21-08694-08694 Date of Disbursement 11 / 07 / 2006	
Mailing Address 62 Handy Street Apartment 8		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vernee Brooks		Transaction ID: 30b-21-08700-08700 Date of Disbursement 11 / 07 / 2006	
Mailing Address 100 Roosevelt Avenue Apartment T2		Amount of Each Disbursement this Period 50.00	
City Carteret State NJ Zip Code 07008	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1178 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christian Rocha		Transaction ID: 30b-21-08709-08709 Date of Disbursement 11 / 07 / 2006
Mailing Address 36 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tanya Santiago		Transaction ID: 30b-21-08711-08711 Date of Disbursement 11 / 07 / 2006
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 50.00
City Somerset State NJ Zip Code 08873		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ebony Williams		Transaction ID: 30b-21-08713-08713 Date of Disbursement 11 / 07 / 2006
Mailing Address 40 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ryan Sales Full Name (Last, First, Middle Initial) Ryan Sales Mailing Address 493 Ryders Lane City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08714-08714 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Ryan Sales Full Name (Last, First, Middle Initial) Ryan Sales Mailing Address 493 Ryders Lane City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08715-08715 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Ryan Sales Full Name (Last, First, Middle Initial) Ryan Sales Mailing Address 493 Ryders Lane City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08716-08716 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ryan Sales		Transaction ID: 30b-21-08717-08717 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 50.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ryan Sales		Transaction ID: 30b-21-08718-08718 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 50.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ryan Sales		Transaction ID: 30b-21-08719-08719 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 50.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ryan Sales		Transaction ID: 30b-21-08720-08720 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 50.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ryan Sales		Transaction ID: 30b-21-08721-08721 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 50.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ryan Sales		Transaction ID: 30b-21-08722-08722 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 50.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Karen Stallings		Transaction ID: 30b-21-08723-08723 Date of Disbursement 11 / 07 / 2006
Mailing Address 1045 Grove Avenue Apartment 13J		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Karen Stallings		Transaction ID: 30b-21-08724-08724 Date of Disbursement 11 / 07 / 2006
Mailing Address 1045 Grove Avenue Apartment 13J		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Karen Stallings		Transaction ID: 30b-21-08725-08725 Date of Disbursement 11 / 07 / 2006
Mailing Address 1045 Grove Avenue Apartment 13J		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Conner Gill		Transaction ID: 30b-21-08726-08726 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00	
City Montclair	State NJ	Zip Code 07042	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Conner Gill		Transaction ID: 30b-21-08727-08727 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00	
City Montclair	State NJ	Zip Code 07042	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Conner Gill		Transaction ID: 30b-21-08728-08728 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00	
City Montclair	State NJ	Zip Code 07042	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Conner Gill		Transaction ID: 30b-21-08729-08729 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00	
City Montclair	State NJ	Zip Code 07042	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Conner Gill		Transaction ID: 30b-21-08730-08730 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00	
City Montclair	State NJ	Zip Code 07042	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Conner Gill		Transaction ID: 30b-21-08731-08731 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00	
City Montclair	State NJ	Zip Code 07042	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jack Bohrer		Transaction ID: 30b-21-08732-08732 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Jack Bohrer		Transaction ID: 30b-21-08733-08733 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Jack Bohrer		Transaction ID: 30b-21-08734-08734 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jack Bohrer		Transaction ID: 30b-21-08735-08735 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Jack Bohrer		Transaction ID: 30b-21-08736-08736 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Jack Bohrer		Transaction ID: 30b-21-08737-08737 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1187 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jack Bohrer		Transaction ID: 30b-21-08738-08738 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jack Bohrer		Transaction ID: 30b-21-08739-08739 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jack Bohrer		Transaction ID: 30b-21-08740-08740 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 50.00	
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jack Bohrer Full Name (Last, First, Middle Initial) Mailing Address 3 Compton Court City Monroe State NJ Zip Code 08831 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08741-08741 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Lauren Russell Park Full Name (Last, First, Middle Initial) Mailing Address 323D Crowells Road City Highland Park State NJ Zip Code 08904 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08742-08742 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Lauren Russell Park Full Name (Last, First, Middle Initial) Mailing Address 323D Crowells Road City Highland Park State NJ Zip Code 08904 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08743-08743 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lauren Russell Park		Transaction ID: 30b-21-08744-08744 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 323D Crowells Road		Amount of Each Disbursement this Period 50.00
City Highland Park State NJ Zip Code 08904	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-08745-08745 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-08746-08746 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-08747-08747 Date of Disbursement 11 / 07 / 2006	
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00	
City Piscataway	State NJ	Zip Code 08854	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-08748-08748 Date of Disbursement 11 / 07 / 2006	
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00	
City Piscataway	State NJ	Zip Code 08854	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-08749-08749 Date of Disbursement 11 / 07 / 2006	
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00	
City Piscataway	State NJ	Zip Code 08854	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-08750-08750 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-08751-08751 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jasmine Lawrence Lewis Ileks		Transaction ID: 30b-21-08752-08752 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1192 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jasmine Lawrence Lewis Ilekis		Transaction ID: 30b-21-08753-08753 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 50.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Steve Birmingham		Transaction ID: 30b-21-08755-08755 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 8 Milliken Road		Amount of Each Disbursement this Period 50.00
City Sayreville State NJ Zip Code 08872	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) James Corsini		Transaction ID: 30b-21-08760-08760 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 12 Central Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1193 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marlo Diaz		Transaction ID: 30b-21-08761-08761 Date of Disbursement 11 / 07 / 2006	
Mailing Address 65 Pennsylvania Way		Amount of Each Disbursement this Period 50.00	
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Eugene Grignonier		Transaction ID: 30b-21-08764-08764 Date of Disbursement 11 / 07 / 2006	
Mailing Address 60 Frost		Amount of Each Disbursement this Period 50.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tiana Tucker		Transaction ID: 30b-21-08770-08770 Date of Disbursement 11 / 07 / 2006	
Mailing Address 30 Hana Road		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1194 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Oyediron Adelakun		Transaction ID: 30b-21-08772-08772 Date of Disbursement 11 / 07 / 2006	
Mailing Address 8 Village Gate Road		Amount of Each Disbursement this Period 50.00	
City Washington State NJ Zip Code 07882	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William Brier		Transaction ID: 30b-21-08773-08773 Date of Disbursement 11 / 07 / 2006	
Mailing Address 18 Norman Street		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Priya Chadha		Transaction ID: 30b-21-08775-08775 Date of Disbursement 11 / 07 / 2006	
Mailing Address 51 Kelly Way		Amount of Each Disbursement this Period 50.00	
City Monmouth Jun State NJ Zip Code 08852	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1195 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dominic Mangonon		Transaction ID: 30b-21-08779-08779 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 93 Easton Avenue Apartment 1		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lotanna Onuekwusi		Transaction ID: 30b-21-08781-08781 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 369 Park Avenue Apt. E 18		Amount of Each Disbursement this Period 50.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Oba Simmonds		Transaction ID: 30b-21-08783-08783 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 88 Freemont Court		Amount of Each Disbursement this Period 50.00
City Somerset State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Daniel Winters Full Name (Last, First, Middle Initial) Mailing Address 79 Harmon Road City Edison State NJ Zip Code 08837 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08785-08785 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Tiffany Jenkins Full Name (Last, First, Middle Initial) Mailing Address 18 Van Ness Court City Maplewood State NJ Zip Code 07040 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08790-08790 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Mary Klimik Full Name (Last, First, Middle Initial) Mailing Address PO Box 5478 City New Brunswick State NJ Zip Code 08903 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-08792-08792 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Rivera		Transaction ID: 30b-21-08795-08795 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1465 Thomas Avenue		Amount of Each Disbursement this Period 50.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Justin Dooley		Transaction ID: 30b-21-08799-08799 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Greenbriar Lane		Amount of Each Disbursement this Period 50.00
City Perrineville State NJ Zip Code 08535	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christian Rocha		Transaction ID: 30b-21-08807-08807 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tanya Santiago		Transaction ID: 30b-21-08808-08808 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 50.00
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ebony Williams		Transaction ID: 30b-21-08809-08809 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 40 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kristen Corno		Transaction ID: 30b-21-08810-08810 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 41 Brookville Road.		Amount of Each Disbursement this Period 50.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Croker		Transaction ID: 30b-21-08811-08811 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 769 Pequest Road		Amount of Each Disbursement this Period 50.00
City Oxford State NJ Zip Code 07863	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rachel Elfenbein		Transaction ID: 30b-21-08812-08812 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Loweland Drive		Amount of Each Disbursement this Period 50.00
City Mountain Lakes State NJ Zip Code 07046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Robert Estor		Transaction ID: 30b-21-08813-08813 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 43 Wellington Road		Amount of Each Disbursement this Period 50.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Abdul Glover		Transaction ID: 30b-21-08816-08816 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Mara Villanueva		Transaction ID: 30b-21-08821-08821 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 Crossgate Road		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Michael J. Hayne		Transaction ID: 30b-21-08822-08822 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael J. Hayne		Transaction ID: 30b-21-08823-08823 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Michael J. Hayne		Transaction ID: 30b-21-08824-08824 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Michael J. Hayne		Transaction ID: 30b-21-08825-08825 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael J. Hayne		Transaction ID: 30b-21-08826-08826 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael J. Hayne		Transaction ID: 30b-21-08828-08828 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Michael J. Hayne		Transaction ID: 30b-21-08829-08829 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael J. Hayne		Transaction ID: 30b-21-08830-08830 Date of Disbursement 11 / 07 / 2006
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael J. Hayne		Transaction ID: 30b-21-08832-08832 Date of Disbursement 11 / 07 / 2006
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 50.00
City Holmdel State NJ Zip Code 07733	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Michelle Ball		Transaction ID: 30b-21-08833-08833 Date of Disbursement 11 / 07 / 2006
Mailing Address 68 Park Avenue Apartment 405		Amount of Each Disbursement this Period 50.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Susan Ball		Transaction ID: 30b-21-08834-08834 Date of Disbursement 11 / 07 / 2006
Mailing Address 68 Park Avenue Apartment 405		Amount of Each Disbursement this Period 50.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Hayin Candiotti		Transaction ID: 30b-21-08974-08974 Date of Disbursement 11 / 07 / 2006
Mailing Address 42 East 22nd Avenue		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07513	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gloria Donarye		Transaction ID: 30b-21-09052-09052 Date of Disbursement 11 / 07 / 2006
Mailing Address 460 Paxton Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Fatema Abuhamdah Full Name (Last, First, Middle Initial) Mailing Address 142 Caldwell Avenue City Paterson State NJ Zip Code 07510 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09054-09054 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Krystle Adams Full Name (Last, First, Middle Initial) Mailing Address 293 East 18th Street City Paterson State NJ Zip Code 07510 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09055-09055 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Austin Ayers Full Name (Last, First, Middle Initial) Mailing Address 889 Edwards Road City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09057-09057 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) John Bishop		Transaction ID: 30b-21-09058-09058 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 Broadway 4-G		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Elena Cesario		Transaction ID: 30b-21-09060-09060 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 443 B Marshall Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07503	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Steven Freeman		Transaction ID: 30b-21-09065-09065 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7 North Pine Lane		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nyla Fussell		Transaction ID: 30b-21-09066-09066 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 300 Pompton Road		Amount of Each Disbursement this Period 50.00	
City Wayne State NJ Zip Code 07470	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jesse Garcia		Transaction ID: 30b-21-09067-09067 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 143 East Ninth Street		Amount of Each Disbursement this Period 50.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vesna Goreska		Transaction ID: 30b-21-09068-09068 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 273 Harding Avenue		Amount of Each Disbursement this Period 50.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Nikolce Goreski Full Name (Last, First, Middle Initial) Mailing Address 273 Harding Avenue City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09069-09069 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Zoran Goreski Full Name (Last, First, Middle Initial) Mailing Address 14 Lincoln Avenue City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09070-09070 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Barry Green Full Name (Last, First, Middle Initial) Mailing Address 730 Elizabeth Avenue City Lyndhurst State NJ Zip Code 07071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09071-09071 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melissa Harris		Transaction ID: 30b-21-09073-09073 Date of Disbursement 11 / 07 / 2006	
Mailing Address 7 Heller Place		Amount of Each Disbursement this Period 50.00	
City Maplewood State NJ Zip Code 07040	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Janice Latorre		Transaction ID: 30b-21-09074-09074 Date of Disbursement 11 / 07 / 2006	
Mailing Address 24 East Ninth Street		Amount of Each Disbursement this Period 50.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jorge Morel		Transaction ID: 30b-21-09079-09079 Date of Disbursement 11 / 07 / 2006	
Mailing Address 128 East 8th Street		Amount of Each Disbursement this Period 50.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Michael Ortiz Jr</p>		<p>Transaction ID: 30b-21-09081-09081 Date of Disbursement</p>
<p>Mailing Address 452 Ridge Road</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Lyndhurst State NJ Zip Code 07071</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Romina Pascual</p>		<p>Transaction ID: 30b-21-09084-09084 Date of Disbursement</p>
<p>Mailing Address 94 Market Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Paterson State NJ Zip Code 07505</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Trevor Price</p>		<p>Transaction ID: 30b-21-09085-09085 Date of Disbursement</p>
<p>Mailing Address Towers, William Paterson Universit</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>
<p>City Wayne State NJ Zip Code 07470</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>	
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>	
<p>Candidate Name</p>	<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1211 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jonathan Rivera Full Name (Last, First, Middle Initial) Mailing Address 34 Brown Avenue City Prospect Park State NJ Zip Code 07508 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09086-09086 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. George Rodriguez Full Name (Last, First, Middle Initial) Mailing Address 111 Rowland Avenue City Clifton State NJ Zip Code 07012 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09087-09087 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Bernel Smith Full Name (Last, First, Middle Initial) Mailing Address 485 East 33rd Street City Paterson State NJ Zip Code 07510 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09090-09090 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

150.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Pernel Smith Full Name (Last, First, Middle Initial) Mailing Address 486 E. 33rd St City Paterson State NJ Zip Code 07510 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09091-09091 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Tiffany Smith Full Name (Last, First, Middle Initial) Mailing Address 219 East Broad Street City Millville State NJ Zip Code 08332 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09092-09092 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Tommy Stensgard Full Name (Last, First, Middle Initial) Mailing Address 509 3rd Avenue City Lyndhurst State NJ Zip Code 07071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09094-09094 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Veronica Yacco		Transaction ID: 30b-21-09097-09097 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 12 Hillside Road		Amount of Each Disbursement this Period 50.00
City Kinnelon State NJ Zip Code 07405	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sharan Zarate		Transaction ID: 30b-21-09098-09098 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 10 Garretsee Avenue		Amount of Each Disbursement this Period 50.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Quadir Ames		Transaction ID: 30b-21-09102-09102 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 184 Lawrence Place		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Altimont Hacker Full Name (Last, First, Middle Initial) Mailing Address 440 East 26th Apartment 2 City Paterson State NJ Zip Code 07504 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09112-09112 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Maquet Jefferson Full Name (Last, First, Middle Initial) Mailing Address 35 Mary Street Apartment 1E City Paterson State NJ Zip Code 07503 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09117-09117 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Sampson Lockhart Full Name (Last, First, Middle Initial) Mailing Address 200 12th Avenue City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09120-09120 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shamekia McFadden		Transaction ID: 30b-21-09124-09124 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 144 Godwin Avenue		Amount of Each Disbursement this Period 50.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Wanda Phillips		Transaction ID: 30b-21-09128-09128 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 41-43 Martin St.		Amount of Each Disbursement this Period 50.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Ebony Williams		Transaction ID: 30b-21-09147-09147 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 184 Lawrence Street		Amount of Each Disbursement this Period 50.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. James E Williams Full Name (Last, First, Middle Initial) Mailing Address 400 Broadway Apartment 2C City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09150-09150 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Latoya D Williams Full Name (Last, First, Middle Initial) Mailing Address 184 Lawrence Place City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09151-09151 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Latoya D Williams Full Name (Last, First, Middle Initial) Mailing Address 184 Lawrence Place City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09152-09152 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sonya Williams		Transaction ID: 30b-21-09154-09154 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 300 Hamilton Avenue		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Watkina Aquino		Transaction ID: 30b-21-09158-09158 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 82 Pennington Avenue Apartment 2L		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Bianca Arambulo		Transaction ID: 30b-21-09159-09159 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 150 Harrison Street #2		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Chanelle Arambulo		Transaction ID: 30b-21-09160-09160 Date of Disbursement 11 / 07 / 2006	
Mailing Address 150 Harrison Street #2		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Emmanuel Cabrera		Transaction ID: 30b-21-09161-09161 Date of Disbursement 11 / 07 / 2006	
Mailing Address 117 8th Street		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jhon Cardona		Transaction ID: 30b-21-09163-09163 Date of Disbursement 11 / 07 / 2006	
Mailing Address 437 Howe Avenue		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ana Carvajal Full Name (Last, First, Middle Initial) Mailing Address 26 Grace Avenue City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09164-09164 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. JONATHAN COLON Full Name (Last, First, Middle Initial) Mailing Address 74 Bloomfield Avenue City Paterson State NJ Zip Code 07513 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09165-09165 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Luz Figuero Full Name (Last, First, Middle Initial) Mailing Address 46 Sherman Street 2nd Floor City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09167-09167 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Sully Garcia Full Name (Last, First, Middle Initial) Mailing Address 381 Harrison Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09168-09168 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Ricardo Gomez Full Name (Last, First, Middle Initial) Mailing Address 3 Lucille Place #12 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09169-09169 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Pedro Gonzalez Full Name (Last, First, Middle Initial) Mailing Address 123 Passaic Street #3 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09170-09170 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Richie Gonzalez Full Name (Last, First, Middle Initial) Mailing Address 106 Lexington Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09171-09171 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Luis Goris Full Name (Last, First, Middle Initial) Mailing Address 177 8th Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09172-09172 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Michelle Hernandez Full Name (Last, First, Middle Initial) Mailing Address 12 Martha Place City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09173-09173 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Frank Lantigua		Transaction ID: 30b-21-09175-09175 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7-9 3rd Street, Apartment 4		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Johnny Martinez		Transaction ID: 30b-21-09176-09176 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 204 President Street #220		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Sabrina Martinez		Transaction ID: 30b-21-09177-09177 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 18 Federal Street		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Fior Menier Full Name (Last, First, Middle Initial) Mailing Address 498 Boulevard City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09179-09179 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Russell Milligan Full Name (Last, First, Middle Initial) Mailing Address 24 State Street, Apartment 2C City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09180-09180 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Felix Nunez Full Name (Last, First, Middle Initial) Mailing Address 60 Jackson Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09181-09181 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angel Perez		Transaction ID: 30b-21-09182-09182 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 58 Howe Avenue, Apartment 15		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Ely Polanco		Transaction ID: 30b-21-09183-09183 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 242 Totowa Road		Amount of Each Disbursement this Period 50.00
City Totowa State NJ Zip Code 07512	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Vickiana Polanco		Transaction ID: 30b-21-09184-09184 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 227 Monroe Street		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Lilianny Ramos		Transaction ID: 30b-21-09186-09186 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 61 Irving Place		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

B. Full Name (Last, First, Middle Initial) Deivis Reyes		Transaction ID: 30b-21-09187-09187 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 147 Summer Street		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

C. Full Name (Last, First, Middle Initial) Michael Rivera		Transaction ID: 30b-21-09188-09188 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 53 Park Avenue Apt 2		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carlos Rodriguez		Transaction ID: 30b-21-09189-09189 Date of Disbursement 11 / 07 / 2006	
Mailing Address 100 Passaic Street Apt 4G		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Roberto Rosario		Transaction ID: 30b-21-09190-09190 Date of Disbursement 11 / 07 / 2006	
Mailing Address 177 Eight Street		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joel Rufino		Transaction ID: 30b-21-09191-09191 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 4th Street		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tiffany Rutherford		Transaction ID: 30b-21-09192-09192 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 297 Chestnut Street		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Cesar Santana		Transaction ID: 30b-21-09193-09193 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 272 Hope Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mennio Soto		Transaction ID: 30b-21-09194-09194 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Henderson Street		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Domingo Tejada Full Name (Last, First, Middle Initial) Mailing Address 106 Passaic Street, Apartment 2 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09195-09195 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Joel Toribio Full Name (Last, First, Middle Initial) Mailing Address 194 8th Street Apartment 1 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09196-09196 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Juliany Toribio Full Name (Last, First, Middle Initial) Mailing Address 194 8th Street Apartment 1 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09197-09197 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aladino Urban		Transaction ID: 30b-21-09198-09198 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Aladino Urban		Transaction ID: 30b-21-09199-09199 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Alexander Urban		Transaction ID: 30b-21-09200-09200 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jason Urban		Transaction ID: 30b-21-09201-09201 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Francisco Vallejo		Transaction ID: 30b-21-09202-09202 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 162 Gregory Ave, #9		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Joel Vargas		Transaction ID: 30b-21-09203-09203 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 39 Hammond Avenue #1		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andy Vasquez		Transaction ID: 30b-21-09204-09204 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 106 Howe Avenue #24		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Carlos Vasquez		Transaction ID: 30b-21-09205-09205 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 96 Hammond Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Carlos Vasquez		Transaction ID: 30b-21-09206-09206 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 96 Hammond Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Dahiana Vasquez Full Name (Last, First, Middle Initial) Mailing Address 53 Burgess Place City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09207-09207 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Luis Vasquez Full Name (Last, First, Middle Initial) Mailing Address 7-9 3rd Street #5 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09208-09208 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Mabel Vasquez Full Name (Last, First, Middle Initial) Mailing Address 171 Van Buren Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09209-09209 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Nelsy Vasquez Full Name (Last, First, Middle Initial) Mailing Address 7-9 3rd Street, Apt. 5 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09210-09210 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Bianca Arambulo Full Name (Last, First, Middle Initial) Mailing Address 150 Harrison Street #2 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09211-09211 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Chanelle Arambulo Full Name (Last, First, Middle Initial) Mailing Address 150 Harrison Street #2 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09212-09212 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Edward Capellan Full Name (Last, First, Middle Initial) Mailing Address 7-9 3rd Street #12 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09213-09213 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Richie Gonzalez Full Name (Last, First, Middle Initial) Mailing Address 106 Lexington Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09215-09215 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Frank Lantigua Full Name (Last, First, Middle Initial) Mailing Address 7-9 3rd Street, Apartment 4 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09216-09216 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1235 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sabrina Martinez		Transaction ID: 30b-21-09217-09217 Date of Disbursement 11 / 07 / 2006	
Mailing Address 18 Federal Street		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Felix Nunez		Transaction ID: 30b-21-09218-09218 Date of Disbursement 11 / 07 / 2006	
Mailing Address 60 Jackson Street		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joel Toribio		Transaction ID: 30b-21-09219-09219 Date of Disbursement 11 / 07 / 2006	
Mailing Address 194 8th Street Apartment 1		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Luis Vasquez		Transaction ID: 30b-21-09220-09220 Date of Disbursement 11 / 07 / 2006	
Mailing Address 7-9 3rd Street #5		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nelsy Vasquez		Transaction ID: 30b-21-09221-09221 Date of Disbursement 11 / 07 / 2006	
Mailing Address 7-9 3rd Street, Apt. 5		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Aladino Urban		Transaction ID: 30b-21-09222-09222 Date of Disbursement 11 / 07 / 2006	
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 50.00	
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alexander Urban		Transaction ID: 30b-21-09223-09223 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Andy Vasquez		Transaction ID: 30b-21-09224-09224 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 106 Howe Avenue #24		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ely Polanco		Transaction ID: 30b-21-09225-09225 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 242 Totowa Road		Amount of Each Disbursement this Period 50.00
City Totowa State NJ Zip Code 07512	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jason Urban		Transaction ID: 30b-21-09226-09226 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 50.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Fatema Abuhamdah		Transaction ID: 30b-21-09227-09227 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 142 Caldwell Avenue		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07510	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Krystle Adams		Transaction ID: 30b-21-09228-09228 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 293 East 18th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07510	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Austin Ayers		Transaction ID: 30b-21-09229-09229
Mailing Address 889 Edwards Road		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Parsippany	State NJ	Zip Code 07054
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Austin Ayers		Transaction ID: 30b-21-09230-09230
Mailing Address 889 Edwards Road		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Parsippany	State NJ	Zip Code 07054
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. John Bishop		Transaction ID: 30b-21-09231-09231
Mailing Address 400 Broadway 4-G		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Paterson	State NJ	Zip Code 07501
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Elena Cesario		Transaction ID: 30b-21-09234-09234 Date of Disbursement 11 / 07 / 2006	
Mailing Address 443 B Marshall Street		Amount of Each Disbursement this Period 50.00	
City Paterson State NJ Zip Code 07503	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Nicole Deleasa		Transaction ID: 30b-21-09236-09236 Date of Disbursement 11 / 07 / 2006	
Mailing Address 801 North Broad Street Apt. 4B		Amount of Each Disbursement this Period 50.00	
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Jesse Garcia		Transaction ID: 30b-21-09237-09237 Date of Disbursement 11 / 07 / 2006	
Mailing Address 143 East Ninth Street		Amount of Each Disbursement this Period 50.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1241 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nikolce Goreski		Transaction ID: 30b-21-09238-09238 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 273 Harding Avenue		Amount of Each Disbursement this Period 50.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Vesna Goreska		Transaction ID: 30b-21-09239-09239 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 273 Harding Avenue		Amount of Each Disbursement this Period 50.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Zoran Goreski		Transaction ID: 30b-21-09240-09240 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 Lincoln Avenue		Amount of Each Disbursement this Period 50.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Barry Green		Transaction ID: 30b-21-09241-09241 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 730 Elizabeth Avenue		Amount of Each Disbursement this Period 50.00
City Lyndhurst State NJ Zip Code 07071	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Barry Green		Transaction ID: 30b-21-09242-09242 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 730 Elizabeth Avenue		Amount of Each Disbursement this Period 50.00
City Lyndhurst State NJ Zip Code 07071	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Tommy Heredia		Transaction ID: 30b-21-09243-09243 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 77 1/2 Montclair Avenue		Amount of Each Disbursement this Period 50.00
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1243 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Tommy Heredia Full Name (Last, First, Middle Initial) Mailing Address 77 1/2 Montclair Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09244-09244 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Janice Latorre Full Name (Last, First, Middle Initial) Mailing Address 24 East Ninth Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09245-09245 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Jorge Morel Full Name (Last, First, Middle Initial) Mailing Address 128 East 8th Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09247-09247 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. David Odum		Transaction ID: 30b-21-09248-09248 Date of Disbursement 11 / 07 / 2006	
Mailing Address 300 Pompton Rd		Amount of Each Disbursement this Period 50.00	
City Wayne State NJ Zip Code 07470	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Ortiz Jr		Transaction ID: 30b-21-09249-09249 Date of Disbursement 11 / 07 / 2006	
Mailing Address 452 Ridge Road		Amount of Each Disbursement this Period 50.00	
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jonathan Rivera		Transaction ID: 30b-21-09254-09254 Date of Disbursement 11 / 07 / 2006	
Mailing Address 34 Brown Avenue		Amount of Each Disbursement this Period 50.00	
City Prospect Park State NJ Zip Code 07508	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. George Rodriguez		Transaction ID: 30b-21-09255-09255 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 111 Rowland Avenue		Amount of Each Disbursement this Period 50.00
City Clifton State NJ Zip Code 07012	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Tiara Samuel		Transaction ID: 30b-21-09256-09256 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Bayberry Drive		Amount of Each Disbursement this Period 50.00
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tiara Samuel		Transaction ID: 30b-21-09257-09257 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Bayberry Drive		Amount of Each Disbursement this Period 50.00
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Bernel Smith Full Name (Last, First, Middle Initial) Mailing Address 485 East 33rd Street City Paterson State NJ Zip Code 07510 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09258-09258 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Pernel Smith Full Name (Last, First, Middle Initial) Mailing Address 486 E. 33rd St City Paterson State NJ Zip Code 07510 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09259-09259 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Tommy Stensgard Full Name (Last, First, Middle Initial) Mailing Address 509 3rd Avenue City Lyndhurst State NJ Zip Code 07071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09260-09260 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1247 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Barbara Walensky		Transaction ID: 30b-21-09262-09262 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 76 DeWitt Street		Amount of Each Disbursement this Period 50.00
City Garfield State NJ Zip Code 07026	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Barbara Walensky		Transaction ID: 30b-21-09263-09263 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 76 DeWitt Street		Amount of Each Disbursement this Period 50.00
City Garfield State NJ Zip Code 07026	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Veronica Yacco		Transaction ID: 30b-21-09264-09264 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 12 Hillside Road		Amount of Each Disbursement this Period 50.00
City Kinnelon State NJ Zip Code 07405	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1248 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sharan Zarate		Transaction ID: 30b-21-09265-09265 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 10 Garretsee Avenue		Amount of Each Disbursement this Period 50.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lisa Luster		Transaction ID: 30b-21-09308-09308 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 566 Yale Avenue		Amount of Each Disbursement this Period 50.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sherry Kennedy		Transaction ID: 30b-21-09309-09309 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1881 Mountain Drive		Amount of Each Disbursement this Period 50.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1249 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sharla Canion		Transaction ID: 30b-21-09312-09312 Date of Disbursement 11 / 07 / 2006
Mailing Address 5636 West Buck Street		Amount of Each Disbursement this Period 50.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Clara Luster		Transaction ID: 30b-21-09314-09314 Date of Disbursement 11 / 07 / 2006
Mailing Address 2237 Helen Avenue		Amount of Each Disbursement this Period 50.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Timothy Luster		Transaction ID: 30b-21-09316-09316 Date of Disbursement 11 / 07 / 2006
Mailing Address 830 East Elmer Street		Amount of Each Disbursement this Period 50.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sherry Kennedy		Transaction ID: 30b-21-09317-09317 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1881 Mountain Drive		Amount of Each Disbursement this Period 50.00	
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kevin Adams		Transaction ID: 30b-21-09318-09318 Date of Disbursement 11 / 07 / 2006	
Mailing Address 301 North Wade Boulevard Apt 308		Amount of Each Disbursement this Period 50.00	
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Carl Burt		Transaction ID: 30b-21-09343-09343 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1525 Baird Boulevard		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kenwood Hagamin Jr		Transaction ID: 30b-21-09350-09350 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2779 North Congress Road		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Philip Hill		Transaction ID: 30b-21-09354-09354 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 715 Walnut Street		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Willie Hunter		Transaction ID: 30b-21-09360-09360 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 578 Clinton St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Valerie Lumpkin		Transaction ID: 30b-21-09365-09365 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1588 South 9th Street		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Valerie Lumpkin		Transaction ID: 30b-21-09366-09366 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1588 South 9th Street		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Valerie Lumpkin		Transaction ID: 30b-21-09367-09367 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1588 South 9th Street		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gregory Parks		Transaction ID: 30b-21-09376-09376 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gregory Parks		Transaction ID: 30b-21-09377-09377 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gregory Parks		Transaction ID: 30b-21-09378-09378 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1254 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gregory Parks		Transaction ID: 30b-21-09379-09379 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gregory Parks		Transaction ID: 30b-21-09380-09380 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gregory Parks		Transaction ID: 30b-21-09381-09381 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1255 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gregory Parks		Transaction ID: 30b-21-09382-09382 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gregory Parks		Transaction ID: 30b-21-09383-09383 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gregory Parks		Transaction ID: 30b-21-09384-09384 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vida Rosiji		Transaction ID: 30b-21-09388-09388 Date of Disbursement 11 / 07 / 2006	
Mailing Address 327 Chestnut Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lisa Williams		Transaction ID: 30b-21-09391-09391 Date of Disbursement 11 / 07 / 2006	
Mailing Address 150 Branch Village		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sandra Young		Transaction ID: 30b-21-09395-09395 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2011 Ferry Avenue		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Willie Hunter Full Name (Last, First, Middle Initial) Mailing Address 578 Clinton St City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09438-09438 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Willie Hunter Full Name (Last, First, Middle Initial) Mailing Address 578 Clinton St City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09439-09439 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Willie Hunter Full Name (Last, First, Middle Initial) Mailing Address 578 Clinton St City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09441-09441 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Willie Hunter</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Willie Hunter</p> <p>Mailing Address 578 Clinton St</p> <p>City Camden State NJ Zip Code 08105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-09442-09442</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
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<p>B. Willie Hunter</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Willie Hunter</p> <p>Mailing Address 578 Clinton St</p> <p>City Camden State NJ Zip Code 08105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-09443-09443</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
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<p>C. Willie Hunter</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Willie Hunter</p> <p>Mailing Address 578 Clinton St</p> <p>City Camden State NJ Zip Code 08105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-21-09444-09444</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Willie Hunter		Transaction ID: 30b-21-09445-09445 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 578 Clinton St		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Willie Hunter		Transaction ID: 30b-21-09446-09446 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 578 Clinton St		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Jerguinn Gathers		Transaction ID: 30b-21-09467-09467 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 420 Morse Street Apartment B		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jerguinn Gathers		Transaction ID: 30b-21-09469-09469 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 420 Morse Street Apartment B		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Jerguinn Gathers		Transaction ID: 30b-21-09471-09471 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 420 Morse Street Apartment B		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Jerguinn Gathers		Transaction ID: 30b-21-09472-09472 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 420 Morse Street Apartment B		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jerguinn Gathers Full Name (Last, First, Middle Initial) Mailing Address 420 Morse Street Apartment B City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09473-09473 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Barry Burt Full Name (Last, First, Middle Initial) Mailing Address 879 Chelton Avenue City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09476-09476 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Barry Burt Full Name (Last, First, Middle Initial) Mailing Address 879 Chelton Avenue City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09477-09477 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Phillip Hill Full Name (Last, First, Middle Initial) Mailing Address 715 Walnut St City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09490-09490 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Phillip Hill Full Name (Last, First, Middle Initial) Mailing Address 715 Walnut St City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09491-09491 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Gregory Parks Full Name (Last, First, Middle Initial) Mailing Address 958 Jackson St City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09506-09506 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gregory Parks		Transaction ID: 30b-21-09507-09507 Date of Disbursement 11 / 07 / 2006	
Mailing Address 958 Jackson St		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Vida Rosiji		Transaction ID: 30b-21-09519-09519 Date of Disbursement 11 / 07 / 2006	
Mailing Address 327 Chestnut Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lisa Williams		Transaction ID: 30b-21-09526-09526 Date of Disbursement 11 / 07 / 2006	
Mailing Address 150 Branch Village		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lisa Williams Full Name (Last, First, Middle Initial) Mailing Address 150 Branch Village City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09527-09527 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Rebecca Ware Full Name (Last, First, Middle Initial) Mailing Address 601 Ware Street City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09541-09541 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Vida Rosiji Full Name (Last, First, Middle Initial) Mailing Address 327 Chestnut Street City Camden State NJ Zip Code 08102 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09546-09546 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Barry Burt Full Name (Last, First, Middle Initial) Mailing Address 879 Chelton Avenue City Camden State NJ Zip Code 08104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09552-09552 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Gregory Parks Full Name (Last, First, Middle Initial) Mailing Address 958 Jackson St City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09554-09554 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Stanley Morgan Full Name (Last, First, Middle Initial) Mailing Address 2011 Ferry Avenue, Apt D12 City Camden State NJ Zip Code 08103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09559-09559 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sandra Young		Transaction ID: 30b-21-09560-09560 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2011 Ferry Avenue		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Barry Burt		Transaction ID: 30b-21-09569-09569 Date of Disbursement 11 / 07 / 2006	
Mailing Address 879 Chelton Avenue		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Herbert Purnell		Transaction ID: 30b-21-09571-09571 Date of Disbursement 11 / 07 / 2006	
Mailing Address 206 Branch Village		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vida Rosiji		Transaction ID: 30b-21-09574-09574 Date of Disbursement 11 / 07 / 2006	
Mailing Address 327 Chestnut Street		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lisa Williams		Transaction ID: 30b-21-09576-09576 Date of Disbursement 11 / 07 / 2006	
Mailing Address 150 Branch Village		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Barry Burt		Transaction ID: 30b-21-09580-09580 Date of Disbursement 11 / 07 / 2006	
Mailing Address 879 Chelton Avenue		Amount of Each Disbursement this Period 50.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stephanie Culbreath		Transaction ID: 30b-21-09614-09614 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 733 Morgan Boulevard		Amount of Each Disbursement this Period 50.00
City Camden State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kevin Hugh		Transaction ID: 30b-21-09621-09621 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Stretton Circle		Amount of Each Disbursement this Period 50.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gregory Perry		Transaction ID: 30b-21-09625-09625 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 518-520 Martin Luther King Blvd		Amount of Each Disbursement this Period 50.00
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ishmael Raines		Transaction ID: 30b-21-09630-09630 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 362 Oakland Street		Amount of Each Disbursement this Period 50.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ishmael Raines		Transaction ID: 30b-21-09631-09631 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 362 Oakland Street		Amount of Each Disbursement this Period 50.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Guss Magby		Transaction ID: 30b-21-09632-09632 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 70 North Clinton Avenue Apt 84 A		Amount of Each Disbursement this Period 50.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Hugh		Transaction ID: 30b-21-09633-09633 Date of Disbursement 11 / 07 / 2006	
Mailing Address 9 Stretton Circle		Amount of Each Disbursement this Period 50.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Charles Horne		Transaction ID: 30b-21-09635-09635 Date of Disbursement 11 / 07 / 2006	
Mailing Address 50 Escher Street		Amount of Each Disbursement this Period 50.00	
City Trenton State NJ Zip Code 08609	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Francisco Melendez		Transaction ID: 30b-21-09644-09644 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2101 Briarwood Lane		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Caitlin Florance		Transaction ID: 30b-21-09646-09646 Date of Disbursement 11 / 07 / 2006	
Mailing Address 90 Cedar Street		Amount of Each Disbursement this Period 50.00	
City Midland Park	State NJ	Zip Code 07432	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Britney Wyatt		Transaction ID: 30b-21-09658-09658 Date of Disbursement 11 / 07 / 2006	
Mailing Address 387 Creasant Drive		Amount of Each Disbursement this Period 50.00	
City Franklin Lakes	State NJ	Zip Code 07417	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Eduardo Whitt		Transaction ID: 30b-21-09659-09659 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2523 Standish Avenue		Amount of Each Disbursement this Period 50.00	
City Union	State NJ	Zip Code 07083	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Russell Bravo		Transaction ID: 30b-21-09662-09662 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 655 Palisade Road		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rossana Stella		Transaction ID: 30b-21-09707-09707 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 242 Donaldson Avenue		Amount of Each Disbursement this Period 50.00	
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jayson Reyes		Transaction ID: 30b-21-09709-09709 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2520 Leslie Street		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Defelice		Transaction ID: 30b-21-09711-09711 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Maiden Road		Amount of Each Disbursement this Period 50.00	
City Little Ferry State NJ Zip Code 07643	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andrew Phiavilayvong		Transaction ID: 30b-21-09712-09712 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 Spring Dell Apt.2b		Amount of Each Disbursement this Period 50.00	
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Adam Moursy		Transaction ID: 30b-21-09713-09713 Date of Disbursement 11 / 07 / 2006	
Mailing Address 187 Sylvan Street		Amount of Each Disbursement this Period 50.00	
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Teodor Kostadinov Full Name (Last, First, Middle Initial) Mailing Address 28 Christina Street City Little Ferry State NJ Zip Code 07643 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09717-09717 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Carl Dixon Full Name (Last, First, Middle Initial) Mailing Address 26 Walnut Street City Teaneck State NJ Zip Code 07666 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09727-09727 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Eugene Fernandez Full Name (Last, First, Middle Initial) Mailing Address 18 Park Avenue City Kearny State NJ Zip Code 07032 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09758-09758 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Brian Louvado Full Name (Last, First, Middle Initial) Mailing Address 122 Tappan Street City Kearny State NJ Zip Code 07032 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09759-09759 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Esperanza Flores Full Name (Last, First, Middle Initial) Mailing Address 26 Pulaski Place City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09787-09787 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Shannon Leahy Full Name (Last, First, Middle Initial) Mailing Address 41 Hewlett Drive City Wayne State NJ Zip Code 07082 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09810-09810 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1276 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jennifer Rachaner Full Name (Last, First, Middle Initial) Mailing Address 259 Duncan Avenue City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09837-09837 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Daniel Mastrangelo Full Name (Last, First, Middle Initial) Mailing Address 459 Primrose Avenue City Oradell State NJ Zip Code 07649 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09838-09838 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Daniel Mastrangelo Full Name (Last, First, Middle Initial) Mailing Address 459 Primrose Avenue City Oradell State NJ Zip Code 07649 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-09839-09839 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Elsbeth Crusius</p>		<p>Transaction ID: 30b-21-09843-09843 Date of Disbursement</p>	
<p>Mailing Address 134 Bonhomme Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Hackensack State NJ Zip Code 07601</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Elsbeth Crusius</p>		<p>Transaction ID: 30b-21-09844-09844 Date of Disbursement</p>	
<p>Mailing Address 134 Bonhomme Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Hackensack State NJ Zip Code 07601</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Elsbeth Crusius</p>		<p>Transaction ID: 30b-21-09845-09845 Date of Disbursement</p>	
<p>Mailing Address 134 Bonhomme Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Hackensack State NJ Zip Code 07601</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Elsbeth Crusius</p>		<p>Transaction ID: 30b-21-09846-09846 Date of Disbursement</p>	
<p>Mailing Address 134 Bonhomme Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Hackensack</p>	<p>State NJ</p>	<p>Zip Code 07601</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p>Category/ Type</p>	<p><input type="text" value="50.00"/></p>
<p>Candidate Name</p>		<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	
<p>State: District:</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>B. Full Name (Last, First, Middle Initial) Elsbeth Crusius</p>		<p>Transaction ID: 30b-21-09847-09847 Date of Disbursement</p>	
<p>Mailing Address 134 Bonhomme Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Hackensack</p>	<p>State NJ</p>	<p>Zip Code 07601</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p>Category/ Type</p>	<p><input type="text" value="50.00"/></p>
<p>Candidate Name</p>		<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	
<p>State: District:</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>C. Full Name (Last, First, Middle Initial) Elsbeth Crusius</p>		<p>Transaction ID: 30b-21-09849-09849 Date of Disbursement</p>	
<p>Mailing Address 134 Bonhomme Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Hackensack</p>	<p>State NJ</p>	<p>Zip Code 07601</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p>Category/ Type</p>	<p><input type="text" value="50.00"/></p>
<p>Candidate Name</p>		<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	
<p>State: District:</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="150.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1279 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Elsbeth Crusius		Transaction ID: 30b-21-09850-09850 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 134 Bonhomme Street		Amount of Each Disbursement this Period 50.00
City Hackensack State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Elsbeth Crusius		Transaction ID: 30b-21-09852-09852 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 134 Bonhomme Street		Amount of Each Disbursement this Period 50.00
City Hackensack State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gerald Reiner		Transaction ID: 30b-21-09853-09853 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 353 Conklintown Road		Amount of Each Disbursement this Period 50.00
City Ringwood State NJ Zip Code 07456	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1280 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gerald Reiner		Transaction ID: 30b-21-09854-09854 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 353 Conklintown Road		Amount of Each Disbursement this Period 50.00
City Ringwood State NJ Zip Code 07456	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gerald Reiner		Transaction ID: 30b-21-09855-09855 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 353 Conklintown Road		Amount of Each Disbursement this Period 50.00
City Ringwood State NJ Zip Code 07456	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gerald Reiner		Transaction ID: 30b-21-09856-09856 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 353 Conklintown Road		Amount of Each Disbursement this Period 50.00
City Ringwood State NJ Zip Code 07456	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1281 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ben Feldman		Transaction ID: 30b-21-09873-09873 Date of Disbursement 11 / 07 / 2006	
Mailing Address 310 Prospect Avenue #342		Amount of Each Disbursement this Period 50.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Keith C Carbone		Transaction ID: 30b-21-09942-09942 Date of Disbursement 11 / 07 / 2006	
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00	
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-21-09943-09943 Date of Disbursement 11 / 07 / 2006	
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00	
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1282 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keith C Carbone		Transaction ID: 30b-21-09944-09944 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Keith C Carbone		Transaction ID: 30b-21-09945-09945 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-21-09946-09946 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1283 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keith C Carbone		Transaction ID: 30b-21-09947-09947 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Keith C Carbone		Transaction ID: 30b-21-09948-09948 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-21-09949-09949 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keith C Carbone		Transaction ID: 30b-21-09950-09950 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Keith C Carbone		Transaction ID: 30b-21-09951-09951 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-21-09952-09952 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keith C Carbone		Transaction ID: 30b-21-09953-09953 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Keith C Carbone		Transaction ID: 30b-21-09954-09954 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-21-09956-09956 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

150.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keith C Carbone		Transaction ID: 30b-21-09957-09957 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Keith C Carbone		Transaction ID: 30b-21-09958-09958 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Keith C Carbone		Transaction ID: 30b-21-09959-09959 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 50.00
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Walter Howard Jr.		Transaction ID: 30b-21-10372-10372 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Indian Lane		Amount of Each Disbursement this Period 100.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andria Matthews		Transaction ID: 30b-21-10373-10373 Date of Disbursement 11 / 07 / 2006	
Mailing Address 37 Trumbull Street Apt 2F		Amount of Each Disbursement this Period 100.00	
City New Haven State CT Zip Code 06510	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thelma Allen		Transaction ID: 30b-21-10379-10379 Date of Disbursement 11 / 07 / 2006	
Mailing Address 11 Tillman Place		Amount of Each Disbursement this Period 100.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Nathaniel Anderson Full Name (Last, First, Middle Initial) Mailing Address 39 Country Club City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10380-10380 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Jason Mitchell Full Name (Last, First, Middle Initial) Mailing Address 102 Holly Street City Camden State NJ Zip Code 08103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10386-10386 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Abu Muttakin Ahmadi Full Name (Last, First, Middle Initial) Mailing Address 1219 South 10th Street City Camden State NJ Zip Code 08103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10390-10390 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Beaudelaire Alerte		Transaction ID: 30b-21-10392-10392 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 136 South 13 Street		Amount of Each Disbursement this Period 100.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Abu Muttakin Ahmadi		Transaction ID: 30b-21-10395-10395 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1219 South 10th Street		Amount of Each Disbursement this Period 100.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Rufus Johnson		Transaction ID: 30b-21-10396-10396 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 125 Montrose Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	285.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Rufus Johnson Full Name (Last, First, Middle Initial) Mailing Address 125 Montrose Avenue City Newark State NJ Zip Code 07106 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10397-10397 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Robert Liput Full Name (Last, First, Middle Initial) Mailing Address 64 Brick Street City Newark State NJ Zip Code 07106 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10406-10406 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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C. Charles Martin Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 74 City Orange State NJ Zip Code 07050 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10409-10409 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	85.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Denise Barbosa Full Name (Last, First, Middle Initial) Denise Barbosa Mailing Address 48 Marne Street City Newark State NJ Zip Code 07105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10412-10412 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Dominick Zema Full Name (Last, First, Middle Initial) Dominick Zema Mailing Address 106 Street Francis Street City Newark State NJ Zip Code 07105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10413-10413 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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C. Carmen Corona Full Name (Last, First, Middle Initial) Carmen Corona Mailing Address 68 Warwick Street City Newark State NJ Zip Code 07105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10415-10415 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	85.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vincent Dolise		Transaction ID: 30b-21-10417-10417 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 110 Nichols Street		Amount of Each Disbursement this Period 85.00	
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Alfonse Rossi		Transaction ID: 30b-21-10420-10420 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 22 Oak Street		Amount of Each Disbursement this Period 85.00	
City Nutley State NJ Zip Code 07110	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Louis Abin		Transaction ID: 30b-21-10422-10422 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 251 Walnut Street		Amount of Each Disbursement this Period 85.00	
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bruce Simpson		Transaction ID: 30b-21-10424-10424 Date of Disbursement 11 / 07 / 2006
Mailing Address 72 Wolcott Terrace		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Martha Rivera		Transaction ID: 30b-21-10425-10425 Date of Disbursement 11 / 07 / 2006
Mailing Address 162 North Walnut Street		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Debbie Walker		Transaction ID: 30b-21-10426-10426 Date of Disbursement 11 / 07 / 2006
Mailing Address 226 Rennen Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Angel Colon		Transaction ID: 30b-21-10446-10446 Date of Disbursement 11 / 07 / 2006	
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 85.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Angel Colon		Transaction ID: 30b-21-10448-10448 Date of Disbursement 11 / 07 / 2006	
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 85.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rebecca Colon		Transaction ID: 30b-21-10450-10450 Date of Disbursement 11 / 07 / 2006	
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 85.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carmen Ocasio		Transaction ID: 30b-21-10451-10451 Date of Disbursement 11 / 07 / 2006	
Mailing Address 4 Copper Place		Amount of Each Disbursement this Period 85.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elsa Soto		Transaction ID: 30b-21-10453-10453 Date of Disbursement 11 / 07 / 2006	
Mailing Address 356 Union Avenue		Amount of Each Disbursement this Period 85.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lonnie Hughes		Transaction ID: 30b-21-10467-10467 Date of Disbursement 11 / 07 / 2006	
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 85.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	85.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Chelsea Crowe		Transaction ID: 30b-21-10498-10498 Date of Disbursement 11 / 07 / 2006
Mailing Address 105 Park Street		Amount of Each Disbursement this Period 85.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Gloria Mills		Transaction ID: 30b-21-10500-10500 Date of Disbursement 11 / 07 / 2006
Mailing Address 275 Prospect Street		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Henry De Koninck		Transaction ID: 30b-21-10501-10501 Date of Disbursement 11 / 07 / 2006
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 85.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Zachary Herman		Transaction ID: 30b-21-10506-10506 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 10 Louisburg Square		Amount of Each Disbursement this Period 85.00
City Verona State NJ Zip Code 07044	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Danielle Wright		Transaction ID: 30b-21-10507-10507 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 471 North Maple Avenue		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Ryan Tice		Transaction ID: 30b-21-10509-10509 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 151 Prospect Avenue, Apartment 6F		Amount of Each Disbursement this Period 85.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1298 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ron Botelho		Transaction ID: 30b-21-10513-10513 Date of Disbursement 11 / 07 / 2006
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 85.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Ryan Tice		Transaction ID: 30b-21-10515-10515 Date of Disbursement 11 / 07 / 2006
Mailing Address 151 Prospect Avenue, Apartment 6F		Amount of Each Disbursement this Period 85.00
City Hackensack State NJ Zip Code 07601		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Theo Pollack		Transaction ID: 30b-21-10516-10516 Date of Disbursement 11 / 07 / 2006
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 85.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1299 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jayson Harpster Full Name (Last, First, Middle Initial) Mailing Address 400 South Orange Avenue City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10517-10517 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Rasool Abdullah Full Name (Last, First, Middle Initial) Mailing Address 110 Oak Street City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10524-10524 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
--	--	--

C. Aaliyah Najieb Full Name (Last, First, Middle Initial) Mailing Address PO Box 1103 City Montclair State NJ Zip Code 07042 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10534-10534 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1300 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Barry Jackson</p>		<p>Transaction ID: 30b-21-10538-10538 Date of Disbursement</p>	
<p>Mailing Address 60 Bedford Terrace</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Irvington</p>	<p>State NJ</p>	<p>Zip Code 07111</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="85.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Flora Saldaniita</p>		<p>Transaction ID: 30b-21-10542-10542 Date of Disbursement</p>	
<p>Mailing Address 491 Stuyvesant Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Irvington</p>	<p>State NJ</p>	<p>Zip Code 07111</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="85.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Theo Pollack</p>		<p>Transaction ID: 30b-21-10565-10565 Date of Disbursement</p>	
<p>Mailing Address 14 North Cobane Terrace</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City West Orange</p>	<p>State NJ</p>	<p>Zip Code 07052</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="85.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="255.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1301 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam P Heiser		Transaction ID: 30b-21-10571-10571 Date of Disbursement 11 / 07 / 2006	
Mailing Address 173 Pompton Avenue		Amount of Each Disbursement this Period 85.00	
City Hawthorne State NJ Zip Code 07506	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Toni Sanderson		Transaction ID: 30b-21-10585-10585 Date of Disbursement 11 / 07 / 2006	
Mailing Address 50 Lanark Ave.		Amount of Each Disbursement this Period 85.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Bruce Simpson		Transaction ID: 30b-21-10589-10589 Date of Disbursement 11 / 07 / 2006	
Mailing Address 72 Wolcott Terrace		Amount of Each Disbursement this Period 85.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1302 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Crystal Desvignes		Transaction ID: 30b-21-10591-10591 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 254 Muhammad Ali Avenue		Amount of Each Disbursement this Period 85.00
City Newar State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Martha Rivera		Transaction ID: 30b-21-10594-10594 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 162 North Walnut Street		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Debbie Walker		Transaction ID: 30b-21-10596-10596 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 226 Rennen Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

PAGE 1303 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Martin		Transaction ID: 30b-21-10597-10597 Date of Disbursement 11 / 07 / 2006	
Mailing Address P.O. Box 74		Amount of Each Disbursement this Period 85.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Terry Tucker		Transaction ID: 30b-21-10598-10598 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3001 South Grove Street		Amount of Each Disbursement this Period 85.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Theo Pollack		Transaction ID: 30b-21-10600-10600 Date of Disbursement 11 / 07 / 2006	
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 85.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Kidd		Transaction ID: 30b-21-10610-10610 Date of Disbursement 11 / 07 / 2006	
Mailing Address 65 Headley Terrace, Apt # 1-B		Amount of Each Disbursement this Period 85.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sharon Browning		Transaction ID: 30b-21-10611-10611 Date of Disbursement 11 / 07 / 2006	
Mailing Address 523 Prospect Street, Apt #9		Amount of Each Disbursement this Period 85.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Theresa Combs		Transaction ID: 30b-21-10612-10612 Date of Disbursement 11 / 07 / 2006	
Mailing Address 164 South Harrison Street		Amount of Each Disbursement this Period 85.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Theresa Combs		Transaction ID: 30b-21-10613-10613 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 164 South Harrison Street		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07018	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Teri Smith		Transaction ID: 30b-21-10616-10616 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 130 Shephard Avenue		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07018	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Krystal Bradshaw		Transaction ID: 30b-21-10617-10617 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 216 Rhode Island Avenue 2nd Floor		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07018	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Sherel Johnson Full Name (Last, First, Middle Initial) Mailing Address 276 Amherst Street 1st Floor City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10618-10618 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Herbert Hughes Full Name (Last, First, Middle Initial) Mailing Address 186 Goldsmith Avenue City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10619-10619 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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C. Terry Tucker Full Name (Last, First, Middle Initial) Mailing Address 3001 South Grove Street City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10620-10620 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anthony Vauss		Transaction ID: 30b-21-10625-10625 Date of Disbursement 11 / 07 / 2006	
Mailing Address 41 Laurel Avenue		Amount of Each Disbursement this Period 85.00	
City Irvington	State NJ	Zip Code 07111	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Elaine Beasley		Transaction ID: 30b-21-10639-10639 Date of Disbursement 11 / 07 / 2006	
Mailing Address 97 Court Street		Amount of Each Disbursement this Period 85.00	
City Newark	State NJ	Zip Code 07108	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Victor Parker		Transaction ID: 30b-21-10641-10641 Date of Disbursement 11 / 07 / 2006	
Mailing Address 466 Avon Avenue, 3rd Fl.		Amount of Each Disbursement this Period 85.00	
City Newark	State NJ	Zip Code 07108	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. DeLores Hughes		Transaction ID: 30b-21-10643-10643 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Aisha Legree		Transaction ID: 30b-21-10673-10673 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 81 Harrison Ave.		Amount of Each Disbursement this Period 85.00
City West orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Martha Ruggero		Transaction ID: 30b-21-10678-10678 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 88 Riggs Place WO		Amount of Each Disbursement this Period 85.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1309 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Janet Mitchell Full Name (Last, First, Middle Initial) Mailing Address 84 McKay Avenue City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10687-10687 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Derek Combs Full Name (Last, First, Middle Initial) Mailing Address 164 South Harrison Street City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10688-10688 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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C. Terrance Taylor Full Name (Last, First, Middle Initial) Mailing Address 2544 Audrey Terrace City Union City State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10690-10690 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1310 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Terrance Taylor		Transaction ID: 30b-21-10691-10691 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2544 Audrey Terrace		Amount of Each Disbursement this Period 85.00
City Union City State NJ Zip Code 07083	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Renee Copeland		Transaction ID: 30b-21-10692-10692 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 149 Weequahic Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07112	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Thomas Ross		Transaction ID: 30b-21-10698-10698 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 32 Muhammad Ali Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07108	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1311 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joyce Arnold		Transaction ID: 30b-21-10699-10699 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 298 South 18th Street		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Renee Copeland		Transaction ID: 30b-21-10701-10701 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 149 Weequahic Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lonnie Hughes		Transaction ID: 30b-21-10703-10703 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1312 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Logan Forsey Full Name (Last, First, Middle Initial) Mailing Address 400 South Orange Avenue #237 City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10705-10705 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Timothy O'donnell Full Name (Last, First, Middle Initial) Mailing Address 400 South Orange Avenue City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10706-10706 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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C. Molly Holzbauer Full Name (Last, First, Middle Initial) Mailing Address 400 South Orange Avenue Suite 259 City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10709-10709 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	85.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1313 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jayson Harpster Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-10710-10710 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 South Orange Avenue		Amount of Each Disbursement this Period 85.00
City South Orange State NJ Zip Code 07079	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

B. Andrew Palequin Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-10711-10711 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 South Orange Ave		Amount of Each Disbursement this Period 85.00
City South Orange State NJ Zip Code 07079	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

C. Jessica Barmon Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-10713-10713 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 South Orange Ave		Amount of Each Disbursement this Period 85.00
City South Orange State NJ Zip Code 07079	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tim Sporic		Transaction ID: 30b-21-10714-10714 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 South Orange Avenue		Amount of Each Disbursement this Period 85.00
City South Orange State NJ Zip Code 07079		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael Jacobson		Transaction ID: 30b-21-10715-10715 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 South Orange Ave		Amount of Each Disbursement this Period 85.00
City South Orange State NJ Zip Code 07079		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Marvin Goodson		Transaction ID: 30b-21-10717-10717 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 540 Park Avenue Apt. 12		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1315 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lawana Rollins Full Name (Last, First, Middle Initial) Mailing Address 86 Madonna Place City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10718-10718 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Lonnie Hughes Full Name (Last, First, Middle Initial) Mailing Address 189 North Munn Avenue City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10719-10719 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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C. Marvin Goodson Full Name (Last, First, Middle Initial) Mailing Address 540 Park Avenue Apt. 12 City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10720-10720 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	85.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Krystal Bradshaw		Transaction ID: 30b-21-10721-10721 Date of Disbursement 11 / 07 / 2006
Mailing Address 216 Rhode Island Avenue 2nd Floor		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Michael Rollins		Transaction ID: 30b-21-10723-10723 Date of Disbursement 11 / 07 / 2006
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Rodney Holman		Transaction ID: 30b-21-10730-10730 Date of Disbursement 11 / 07 / 2006
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07107		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1317 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hassan Abdul-Rasheed		Transaction ID: 30b-21-10740-10740 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 259 Reynolds Terrace		Amount of Each Disbursement this Period 85.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Alicia Holman		Transaction ID: 30b-21-10746-10746 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Thomas Ross		Transaction ID: 30b-21-10757-10757 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 32 Muhammad Ali Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joyce Arnold		Transaction ID: 30b-21-10758-10758 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 298 South 18th Street		Amount of Each Disbursement this Period 85.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lash Green		Transaction ID: 30b-21-10760-10760 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 1348 Gray Mill Drive		Amount of Each Disbursement this Period 85.00	
City Scotch Plains State NJ Zip Code 07076	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lash Green		Transaction ID: 30b-21-10761-10761 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 1348 Gray Mill Drive		Amount of Each Disbursement this Period 85.00	
City Scotch Plains State NJ Zip Code 07076	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	85.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gabriel Leonard		Transaction ID: 30b-21-10762-10762 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 87 Augusta Street		Amount of Each Disbursement this Period 85.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gabriel Leonard		Transaction ID: 30b-21-10763-10763 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 87 Augusta Street		Amount of Each Disbursement this Period 85.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jacob McGhee		Transaction ID: 30b-21-10764-10764 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 124 Hamilton Street		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jacob McGhee		Transaction ID: 30b-21-10765-10765 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 124 Hamilton Street		Amount of Each Disbursement this Period 85.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Charles Kidd		Transaction ID: 30b-21-10768-10768 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 65 Headley Terrace, Apt # 1-B		Amount of Each Disbursement this Period 85.00
City Irvington State NJ Zip Code 07111		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gloria Lynch		Transaction ID: 30b-21-10770-10770 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 245 Pomona Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1321 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aaliyah Najieb		Transaction ID: 30b-21-10771-10771 Date of Disbursement 11 / 07 / 2006	
Mailing Address PO Box 1103		Amount of Each Disbursement this Period 85.00	
City Montclair	State NJ	Zip Code 07042	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Theodore Hinton		Transaction ID: 30b-21-10775-10775 Date of Disbursement 11 / 07 / 2006	
Mailing Address 12 Davis Place		Amount of Each Disbursement this Period 85.00	
City East Orange	State NJ	Zip Code 07111	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Alfredo Flores		Transaction ID: 30b-21-10779-10779 Date of Disbursement 11 / 07 / 2006	
Mailing Address 255 Ballantine Parkway		Amount of Each Disbursement this Period 85.00	
City Newark	State NJ	Zip Code 07104	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1322 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Farhan Kamal Full Name (Last, First, Middle Initial) Mailing Address 196 Harrison Avenue City Harrison State NJ Zip Code 07029 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10782-10782 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Martha Abraham Full Name (Last, First, Middle Initial) Mailing Address 295 Woodside Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10783-10783 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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C. Pedro Aquino Full Name (Last, First, Middle Initial) Mailing Address 277 Little Street City Belleville State NJ Zip Code 07109 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10785-10785 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	85.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1323 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Antonio Santana		Transaction ID: 30b-21-10786-10786 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 300 Woodside Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Dioseni Del Jesus		Transaction ID: 30b-21-10787-10787 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 272 Park Avenue		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Victor Parker		Transaction ID: 30b-21-10788-10788 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 466 Avon Avenue, 3rd Fl.		Amount of Each Disbursement this Period 85.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1324 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Conor Edmunds Full Name (Last, First, Middle Initial) Mailing Address 99 Oakland Road City Maplewood State NJ Zip Code 07040 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10790-10790 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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B. Larissa Folk Full Name (Last, First, Middle Initial) Mailing Address PO Box 1067 City Maplewood State NJ Zip Code 07040 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10792-10792 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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C. Yvette Manning Full Name (Last, First, Middle Initial) Mailing Address 34 Bleeker Street City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10793-10793 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	270.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1325 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Thomasina Dunton		Transaction ID: 30b-21-10794-10794 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 51 Grant Avenue 2nd Floor		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kevin Diggs		Transaction ID: 30b-21-10797-10797 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 49 Clinton Avenue		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mark Myrick		Transaction ID: 30b-21-10799-10799 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Bergen Avenue Apt 2A		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1326 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roland Goodson		Transaction ID: 30b-21-10804-10804 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 310 South Harrison Street		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Deborah Norwood		Transaction ID: 30b-21-10805-10805 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Deborah Norwood		Transaction ID: 30b-21-10806-10806 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 52 South Walnut Street		Amount of Each Disbursement this Period 100.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1327 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Janice Williams Full Name (Last, First, Middle Initial) Mailing Address 80 High Street City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10809-10809 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Janice Williams Full Name (Last, First, Middle Initial) Mailing Address 80 High Street City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10810-10810 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Halima Williams Full Name (Last, First, Middle Initial) Mailing Address 211 Orange Road City Montclair State NJ Zip Code 07042 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10811-10811 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Dawn Thornton</p>		<p>Transaction ID: 30b-21-10813-10813 Date of Disbursement</p>	
<p>Mailing Address 1 Waterview Drive</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Lakewood</p>	<p>State NJ</p>	<p>Zip Code 08701</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>B. Full Name (Last, First, Middle Initial) Fuquan Mutalib</p>		<p>Transaction ID: 30b-21-10814-10814 Date of Disbursement</p>	
<p>Mailing Address 7 Center Way</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City East Orange</p>	<p>State NJ</p>	<p>Zip Code 07017</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>C. Full Name (Last, First, Middle Initial) Fuquan Mutalib</p>		<p>Transaction ID: 30b-21-10815-10815 Date of Disbursement</p>	
<p>Mailing Address 7 Center Way</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City East Orange</p>	<p>State NJ</p>	<p>Zip Code 07017</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1329 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Rebekah Walker Full Name (Last, First, Middle Initial) Mailing Address 11 Leigh Avenue City Princeton State NJ Zip Code 08542 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10841-10841 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Christopher Zimbaldi Full Name (Last, First, Middle Initial) Mailing Address 1584 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10842-10842 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Eric Freda Full Name (Last, First, Middle Initial) Mailing Address 1584 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-10843-10843 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1330 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brendan Kelly		Transaction ID: 30b-21-10849-10849 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 123 Fleming Way		Amount of Each Disbursement this Period 100.00
City Princeton State NJ Zip Code 08540	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Xavier Moore		Transaction ID: 30b-21-10858-10858 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 621 Berg Avenue		Amount of Each Disbursement this Period 100.00
City Hamilton State NJ Zip Code 08609	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Laurie Waltzer		Transaction ID: 30b-21-10872-10872 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 68 Marc Drive		Amount of Each Disbursement this Period 100.00
City Dayton State NJ Zip Code 08810	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1331 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Victor F Soliven		Transaction ID: 30b-21-10873-10873 Date of Disbursement 11 / 07 / 2006	
Mailing Address 4 Washington Road		Amount of Each Disbursement this Period 100.00	
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Daniel DeJesus		Transaction ID: 30b-21-10874-10874 Date of Disbursement 11 / 07 / 2006	
Mailing Address 128 Green Street		Amount of Each Disbursement this Period 100.00	
City Somerville State NJ Zip Code 08876	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Conner Gill		Transaction ID: 30b-21-10877-10877 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 100.00	
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1332 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brian Williams		Transaction ID: 30b-21-10891-10891 Date of Disbursement 11 / 07 / 2006	
Mailing Address 34 Pin Oak Drive		Amount of Each Disbursement this Period 100.00	
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Eduardo Ayala		Transaction ID: 30b-21-10906-10906 Date of Disbursement 11 / 07 / 2006	
Mailing Address 23 Dino Drive		Amount of Each Disbursement this Period 100.00	
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Doribelky Reyes		Transaction ID: 30b-21-10910-10910 Date of Disbursement 11 / 07 / 2006	
Mailing Address 77 Washington Street		Amount of Each Disbursement this Period 100.00	
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1333 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marc Gonzales		Transaction ID: 30b-21-10932-10932 Date of Disbursement 11 / 07 / 2006
Mailing Address 1358 Jackson Street NE		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marc Gonzales		Transaction ID: 30b-21-10933-10933 Date of Disbursement 11 / 07 / 2006
Mailing Address 1358 Jackson Street NE		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Marc Gonzales		Transaction ID: 30b-21-10934-10934 Date of Disbursement 11 / 07 / 2006
Mailing Address 1358 Jackson Street NE		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Henry Tsaur		Transaction ID: 30b-21-10938-10938 Date of Disbursement 11 / 07 / 2006	
Mailing Address 160 A Easton Avenue		Amount of Each Disbursement this Period 100.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William Brier		Transaction ID: 30b-21-10939-10939 Date of Disbursement 11 / 07 / 2006	
Mailing Address 18 Norman Street		Amount of Each Disbursement this Period 100.00	
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jasmine Lawrence Lewis Iles		Transaction ID: 30b-21-10941-10941 Date of Disbursement 11 / 07 / 2006	
Mailing Address 59 Royal Drive Apt 211		Amount of Each Disbursement this Period 100.00	
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ryan Sales		Transaction ID: 30b-21-10943-10943 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 100.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ryan Sales		Transaction ID: 30b-21-10944-10944 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 100.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ryan Sales		Transaction ID: 30b-21-10945-10945 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 100.00
City East Brunswick State NJ Zip Code 08816	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1336 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael J. Hayne		Transaction ID: 30b-21-10946-10946 Date of Disbursement 11 / 07 / 2006
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 100.00
City Holmdel State NJ Zip Code 07733	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael J. Hayne		Transaction ID: 30b-21-10947-10947 Date of Disbursement 11 / 07 / 2006
Mailing Address 27 Wildhedge Lane		Amount of Each Disbursement this Period 100.00
City Holmdel State NJ Zip Code 07733	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael Kepich		Transaction ID: 30b-21-10948-10948 Date of Disbursement 11 / 07 / 2006
Mailing Address 145 Cherry Street		Amount of Each Disbursement this Period 50.00
City Carteret State NJ Zip Code 07008	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1337 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Kepich		Transaction ID: 30b-21-10950-10950 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 145 Cherry Street		Amount of Each Disbursement this Period 50.00
City Carteret State NJ Zip Code 07008	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Kepich		Transaction ID: 30b-21-10951-10951 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 145 Cherry Street		Amount of Each Disbursement this Period 50.00
City Carteret State NJ Zip Code 07008	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Michael Kepich		Transaction ID: 30b-21-10952-10952 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 145 Cherry Street		Amount of Each Disbursement this Period 50.00
City Carteret State NJ Zip Code 07008	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1338 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marbey Barcenas		Transaction ID: 30b-21-11073-11073 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marbey Barcenas		Transaction ID: 30b-21-11074-11074 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Marbey Barcenas		Transaction ID: 30b-21-11075-11075 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marbey Barcenas		Transaction ID: 30b-21-11076-11076 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marbey Barcenas		Transaction ID: 30b-21-11077-11077 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Marbey Barcenas		Transaction ID: 30b-21-11078-11078 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marbey Barcenas		Transaction ID: 30b-21-11079-11079 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 50.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Conner Gill		Transaction ID: 30b-21-11080-11080 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Conner Gill		Transaction ID: 30b-21-11081-11081 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1341 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jacqueline Lacayo		Transaction ID: 30b-21-11082-11082 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 251 Fulton Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Jacqueline Lacayo		Transaction ID: 30b-21-11083-11083 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 251 Fulton Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Jacqueline Lacayo		Transaction ID: 30b-21-11084-11084 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 251 Fulton Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1342 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melvi Davila		Transaction ID: 30b-21-11086-11086 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Melvi Davila		Transaction ID: 30b-21-11087-11087 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Melvi Davila		Transaction ID: 30b-21-11088-11088 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1343 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melvi Davila		Transaction ID: 30b-21-11089-11089 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Melvi Davila		Transaction ID: 30b-21-11090-11090 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 50.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Conner Gill		Transaction ID: 30b-21-11091-11091 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Conner Gill		Transaction ID: 30b-21-11092-11092 Date of Disbursement 11 / 07 / 2006	
Mailing Address 6 Rydal Place		Amount of Each Disbursement this Period 50.00	
City Montclair	State NJ	Zip Code 07042	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ryan Sales		Transaction ID: 30b-21-11093-11093 Date of Disbursement 11 / 07 / 2006	
Mailing Address 493 Ryders Lane		Amount of Each Disbursement this Period 50.00	
City East Brunswick	State NJ	Zip Code 08816	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Patrice Abrams		Transaction ID: 30b-21-11109-11109 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3-6 Christina Place		Amount of Each Disbursement this Period 100.00	
City Paterson	State NJ	Zip Code 07502	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1345 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cecile Aponte		Transaction ID: 30b-21-11110-11110 Date of Disbursement 11 / 07 / 2006	
Mailing Address 220 Kearney Street		Amount of Each Disbursement this Period 100.00	
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rudy Cotton		Transaction ID: 30b-21-11113-11113 Date of Disbursement 11 / 07 / 2006	
Mailing Address 446 East 27th Street		Amount of Each Disbursement this Period 100.00	
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James E Williams		Transaction ID: 30b-21-11122-11122 Date of Disbursement 11 / 07 / 2006	
Mailing Address 400 Broadway Apartment 2C		Amount of Each Disbursement this Period 100.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Austin Ayers		Transaction ID: 30b-21-11130-11130 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 889 Edwards Road		Amount of Each Disbursement this Period 100.00
City Parsippany State NJ Zip Code 07054		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Barbara Walensky		Transaction ID: 30b-21-11131-11131 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 76 DeWitt Street		Amount of Each Disbursement this Period 100.00
City Garfield State NJ Zip Code 07026		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Elena Cesario		Transaction ID: 30b-21-11132-11132 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 443 B Marshall Street		Amount of Each Disbursement this Period 100.00
City Paterson State NJ Zip Code 07503		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Fior Menier Full Name (Last, First, Middle Initial) Mailing Address 498 Boulevard City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11330-11330 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 25.00 Category/Type
--	--	--

B. Fior Menier Full Name (Last, First, Middle Initial) Mailing Address 498 Boulevard City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11331-11331 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 25.00 Category/Type
--	--	--

C. Fior Menier Full Name (Last, First, Middle Initial) Mailing Address 498 Boulevard City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11332-11332 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 25.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

75.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Rivera		Transaction ID: 30b-21-11344-11344 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 53 Park Avenue Apt 2		Amount of Each Disbursement this Period 25.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael Rivera		Transaction ID: 30b-21-11345-11345 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 53 Park Avenue Apt 2		Amount of Each Disbursement this Period 25.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Amicis		Transaction ID: 30b-21-11419-11419 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2036 Moris Avenue		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Food & Beverage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hiver Ambroise		Transaction ID: 30b-21-11420-11420 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Edward T. Oatman		Transaction ID: 30b-21-11424-11424 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 East Green Street		Amount of Each Disbursement this Period 100.00
City Woodbridge State NJ Zip Code 07095		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hiver Ambroise		Transaction ID: 30b-21-11425-11425 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hiver Ambrose		Transaction ID: 30b-21-11428-11428 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Abubakar Jalloh		Transaction ID: 30b-21-11432-11432 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nicole Dirado		Transaction ID: 30b-21-11434-11434 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1351 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Abubakar Jalloh		Transaction ID: 30b-21-11437-11437 Date of Disbursement 11 / 07 / 2006	
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 100.00	
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amicis		Transaction ID: 30b-21-11438-11438 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2036 Moris Avenue		Amount of Each Disbursement this Period 100.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Food & Beverage	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Edward T. Oatman		Transaction ID: 30b-21-11439-11439 Date of Disbursement 11 / 07 / 2006	
Mailing Address 14 East Green Street		Amount of Each Disbursement this Period 100.00	
City Woodbridge State NJ Zip Code 07095	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Tomko		Transaction ID: 30b-21-11440-11440 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 328 Spruce Street		Amount of Each Disbursement this Period 100.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Jack Gregory		Transaction ID: 30b-21-11441-11441 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 85 West Main Street		Amount of Each Disbursement this Period 100.00
City Rahway State NJ Zip Code 07065	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Edward T. Oatman		Transaction ID: 30b-21-11442-11442 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 East Green Street		Amount of Each Disbursement this Period 100.00
City Woodbridge State NJ Zip Code 07095	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1353 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicholas H Fixmer		Transaction ID: 30b-21-11445-11445 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 100.00
City State Zip Code Scotch Plains NJ 07076	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Glenna Bowen		Transaction ID: 30b-21-11447-11447 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 215 Chaucer Drive		Amount of Each Disbursement this Period 100.00
City State Zip Code Berkley Heights NJ 07922	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Melissa DeFilippo		Transaction ID: 30b-21-11450-11450 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00
City State Zip Code South Plainfield NJ 07080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael DeFilippo		Transaction ID: 30b-21-11451-11451 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00
City South Plainfield State NJ Zip Code 07080	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hersheys of Westfield		Transaction ID: 30b-21-11454-11454 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 221 South Avenue		Amount of Each Disbursement this Period 100.00
City West Westfield State NJ Zip Code 07090	Category/ Type	
Purpose of Disbursement Food & Beverage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carolyn Sullivan		Transaction ID: 30b-21-11456-11456 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Clover Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1355 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Sheehy		Transaction ID: 30b-21-11458-11458 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1031 Summit Terrace		Amount of Each Disbursement this Period 100.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Hersheys of Westfield		Transaction ID: 30b-21-11462-11462 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 221 South Avenue		Amount of Each Disbursement this Period 100.00
City West Westfield State NJ Zip Code 07090	Purpose of Disbursement Food & Beverage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Hiver Ambroise		Transaction ID: 30b-21-11463-11463 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1356 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Carolyn Sullivan Full Name (Last, First, Middle Initial) Mailing Address 118 Clover Street City Roselle State NJ Zip Code 07203 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11466-11466 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Hiver Ambrose Full Name (Last, First, Middle Initial) Mailing Address 857 Bailey Avenue City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11468-11468 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Tyrone Davis Full Name (Last, First, Middle Initial) Mailing Address 258 Inslee Place City Elizabeth State NJ Zip Code 07206 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11469-11469 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Evelio Salermo		Transaction ID: 30b-21-11470-11470 Date of Disbursement 11 / 07 / 2006
Mailing Address 431 Durling Road		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nicole Dirado		Transaction ID: 30b-21-11472-11472 Date of Disbursement 11 / 07 / 2006
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tyrone Davis		Transaction ID: 30b-21-11473-11473 Date of Disbursement 11 / 07 / 2006
Mailing Address 258 Inslee Place		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07206	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carolyn Sullivan		Transaction ID: 30b-21-11474-11474 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Clover Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hiver Ambroise		Transaction ID: 30b-21-11478-11478 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Joseph Miskiewicz		Transaction ID: 30b-21-11480-11480 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 161 Virginia Street		Amount of Each Disbursement this Period 100.00
City Hillside State NJ Zip Code 07205	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1359 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Tomko		Transaction ID: 30b-21-11482-11482 Date of Disbursement 11 / 07 / 2006
Mailing Address 328 Spruce Street		Amount of Each Disbursement this Period 100.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Hiver Ambroise		Transaction ID: 30b-21-11484-11484 Date of Disbursement 11 / 07 / 2006
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Hersheys of Westfield		Transaction ID: 30b-21-11486-11486 Date of Disbursement 11 / 07 / 2006
Mailing Address 221 South Avenue		Amount of Each Disbursement this Period 100.00
City West Westfield State NJ Zip Code 07090	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hiver Ambroise		Transaction ID: 30b-21-11487-11487 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mohamed Jalloh		Transaction ID: 30b-21-11490-11490 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 127 Oakley Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Carolyn Sullivan		Transaction ID: 30b-21-11491-11491 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Clover Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hersheys of Westfield		Transaction ID: 30b-21-11492-11492 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 221 South Avenue		Amount of Each Disbursement this Period 100.00
City West Westfield State NJ Zip Code 07090		
Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Edward T. Oatman		Transaction ID: 30b-21-11514-11514 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 East Green Street		Amount of Each Disbursement this Period 100.00
City Woodbridge State NJ Zip Code 07095		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Hersheys of Westfield		Transaction ID: 30b-21-11518-11518 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 221 South Avenue		Amount of Each Disbursement this Period 100.00
City West Westfield State NJ Zip Code 07090		
Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph Miskiewicz		Transaction ID: 30b-21-11519-11519 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 161 Virginia Street		Amount of Each Disbursement this Period 100.00
City Hillside State NJ Zip Code 07205	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hiver Ambroise		Transaction ID: 30b-21-11520-11520 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carolyn Sullivan		Transaction ID: 30b-21-11525-11525 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Clover Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1363 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hiver Ambroise		Transaction ID: 30b-21-11528-11528 Date of Disbursement 11 / 07 / 2006
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth	State NJ	
Zip Code 07208		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. John Saverno		Transaction ID: 30b-21-11529-11529 Date of Disbursement 11 / 07 / 2006
Mailing Address 8 Garden Place		Amount of Each Disbursement this Period 100.00
City Cranford	State NJ	
Zip Code 07016		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Carolyn Sullivan		Transaction ID: 30b-21-11532-11532 Date of Disbursement 11 / 07 / 2006
Mailing Address 118 Clover Street		Amount of Each Disbursement this Period 100.00
City Roselle	State NJ	
Zip Code 07203		
Purpose of Disbursement Field Consulting Services		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hiver Ambrose		Transaction ID: 30b-21-11534-11534 Date of Disbursement 11 / 07 / 2006	
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth Genievich		Transaction ID: 30b-21-11537-11537 Date of Disbursement 11 / 07 / 2006	
Mailing Address 408 Inwood Road		Amount of Each Disbursement this Period 100.00	
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ryan Garner		Transaction ID: 30b-21-11539-11539 Date of Disbursement 11 / 07 / 2006	
Mailing Address 337 Hazel Avenue		Amount of Each Disbursement this Period 100.00	
City Garwood State NJ Zip Code 07027	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. James Lowney		Transaction ID: 30b-21-11540-11540 Date of Disbursement 11 / 07 / 2006	
Mailing Address 330 West Jersey Street Apt 4D		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth Genievich		Transaction ID: 30b-21-11542-11542 Date of Disbursement 11 / 07 / 2006	
Mailing Address 408 Inwood Road		Amount of Each Disbursement this Period 100.00	
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Julia Krajech		Transaction ID: 30b-21-11543-11543 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 Vine Street		Amount of Each Disbursement this Period 100.00	
City Hillside State NJ Zip Code 07205	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. James Lowney Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-11545-11545 Date of Disbursement 11 / 07 / 2006
Mailing Address 330 West Jersey Street Apt 4D		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

B. Michael Murray Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-11547-11547 Date of Disbursement 11 / 07 / 2006
Mailing Address 529 Edgar Road		Amount of Each Disbursement this Period 100.00
City Westfield State NJ Zip Code 07090	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

C. Denise LaSpata Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-11550-11550 Date of Disbursement 11 / 07 / 2006
Mailing Address 717 Marcellus Drive		Amount of Each Disbursement this Period 100.00
City Westfield State NJ Zip Code 07090	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1367 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aliesha Davis		Transaction ID: 30b-21-11551-11551	
Mailing Address Apt 8F MRA Village Manor		Date of Disbursement 11 / 07 / 2006	
City Elizabeth	State NJ	Zip Code 07206	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Denise LaSpata		Transaction ID: 30b-21-11555-11555	
Mailing Address 717 Marcellus Drive		Date of Disbursement 11 / 07 / 2006	
City Westfield	State NJ	Zip Code 07090	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Lakira Boston		Transaction ID: 30b-21-11556-11556	
Mailing Address 44 Hope Lane		Date of Disbursement 11 / 07 / 2006	
City Elizabeth	State NJ	Zip Code 07206	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Yuska		Transaction ID: 30b-21-11558-11558 Date of Disbursement 11 / 07 / 2006	
Mailing Address 151 West Lincoln Avenue		Amount of Each Disbursement this Period 100.00	
City Roselle Park State NJ Zip Code 07204	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Edward Kurylo		Transaction ID: 30b-21-11562-11562 Date of Disbursement 11 / 07 / 2006	
Mailing Address 978 Colonial Avenue		Amount of Each Disbursement this Period 100.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kelly Ann Coyle		Transaction ID: 30b-21-11563-11563 Date of Disbursement 11 / 07 / 2006	
Mailing Address 816 Emerson Avenue		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1369 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicole Dirado		Transaction ID: 30b-21-11564-11564 Date of Disbursement 11 / 07 / 2006	
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 100.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Melissa DeFilippo		Transaction ID: 30b-21-11565-11565 Date of Disbursement 11 / 07 / 2006	
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00	
City South Plainfield State NJ Zip Code 07080	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ronald Zuber		Transaction ID: 30b-21-11567-11567 Date of Disbursement 11 / 07 / 2006	
Mailing Address 15 Elm Street		Amount of Each Disbursement this Period 100.00	
City Cranford State NJ Zip Code 07016	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1370 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael Brennan Full Name (Last, First, Middle Initial) Mailing Address 2268 Jersey Avenue City Scotch Plains State NJ Zip Code 07076 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11568-11568 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Melissa DeFilippo Full Name (Last, First, Middle Initial) Mailing Address 320 Arlington Avenue City South Plainfield State NJ Zip Code 07080 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11570-11570 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Tyrone Davis Full Name (Last, First, Middle Initial) Mailing Address 258 Inslee Place City Elizabeth State NJ Zip Code 07206 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11571-11571 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ronald Zuber		Transaction ID: 30b-21-11572-11572 Date of Disbursement 11 / 07 / 2006	
Mailing Address 15 Elm Street		Amount of Each Disbursement this Period 100.00	
City Cranford State NJ Zip Code 07016	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Evelio Salermo		Transaction ID: 30b-21-11574-11574 Date of Disbursement 11 / 07 / 2006	
Mailing Address 431 Durling Road		Amount of Each Disbursement this Period 100.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tyrone Davis		Transaction ID: 30b-21-11576-11576 Date of Disbursement 11 / 07 / 2006	
Mailing Address 258 Inslee Place		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07206	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1372 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Rosemary McClave Full Name (Last, First, Middle Initial) Mailing Address 161 Virginia Street City Hillside State NJ Zip Code 07205 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11578-11578 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Ezzio Bustamante Full Name (Last, First, Middle Initial) Mailing Address 577 Morris Avenue City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11579-11579 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Jack Gregory Full Name (Last, First, Middle Initial) Mailing Address 85 West Main Street City Rahway State NJ Zip Code 07065 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11580-11580 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rosemary McClave		Transaction ID: 30b-21-11583-11583 Date of Disbursement 11 / 07 / 2006	
Mailing Address 161 Virginia Street		Amount of Each Disbursement this Period 100.00	
City Hillside	State NJ	Zip Code 07205	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ezzio Bustamante		Transaction ID: 30b-21-11585-11585 Date of Disbursement 11 / 07 / 2006	
Mailing Address 577 Morris Avenue		Amount of Each Disbursement this Period 100.00	
City Elizabeth	State NJ	Zip Code 07208	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sebastian DELia		Transaction ID: 30b-21-11589-11589 Date of Disbursement 11 / 07 / 2006	
Mailing Address 36 Shady Lane		Amount of Each Disbursement this Period 100.00	
City Fanwood	State NJ	Zip Code 07023	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1374 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael DeFilippo		Transaction ID: 30b-21-11590-11590 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00
City South Plainfield State NJ Zip Code 07080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Edward Kurylo		Transaction ID: 30b-21-11592-11592 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 978 Colonial Avenue		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sebastian DElia		Transaction ID: 30b-21-11594-11594 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 Shady Lane		Amount of Each Disbursement this Period 100.00
City Fanwood State NJ Zip Code 07023	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Wayne Avery		Transaction ID: 30b-21-11597-11597 Date of Disbursement 11 / 07 / 2006	
Mailing Address 815 Summer Street		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael DeFilippo		Transaction ID: 30b-21-11600-11600 Date of Disbursement 11 / 07 / 2006	
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00	
City South Plainfield State NJ Zip Code 07080	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joseph Bodek		Transaction ID: 30b-21-11601-11601 Date of Disbursement 11 / 07 / 2006	
Mailing Address 311 West Henry Street		Amount of Each Disbursement this Period 100.00	
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ronald Zuber		Transaction ID: 30b-21-11602-11602 Date of Disbursement 11 / 07 / 2006
Mailing Address 15 Elm Street		Amount of Each Disbursement this Period 100.00
City Cranford State NJ Zip Code 07016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Tania Jones		Transaction ID: 30b-21-11606-11606 Date of Disbursement 11 / 07 / 2006
Mailing Address 727 Magnolia Road		Amount of Each Disbursement this Period 50.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Rachel Elfenbein		Transaction ID: 30b-21-11620-11620 Date of Disbursement 11 / 07 / 2006
Mailing Address 20 Loweland Drive		Amount of Each Disbursement this Period 50.00
City Mountain Lakes State NJ Zip Code 07046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Croker		Transaction ID: 30b-21-11621-11621 Date of Disbursement 11 / 07 / 2006	
Mailing Address 769 Pequest Road		Amount of Each Disbursement this Period 50.00	
City Oxford State NJ Zip Code 07863	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Abdul Glover		Transaction ID: 30b-21-11627-11627 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tanya Santiago		Transaction ID: 30b-21-11640-11640 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 50.00	
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ebony Williams		Transaction ID: 30b-21-11641-11641 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 40 Quentin Avenue		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Eric Wildenberg		Transaction ID: 30b-21-11647-11647 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 33997 RPO Way		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tarik Seawright		Transaction ID: 30b-21-11653-11653 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 97 Delavan Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sonya Booker		Transaction ID: 30b-21-11711-11711 Date of Disbursement 11 / 07 / 2006	
Mailing Address 29 Riverside Drive		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Quanisha Booker		Transaction ID: 30b-21-11712-11712 Date of Disbursement 11 / 07 / 2006	
Mailing Address 29 Riverside Drive		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Yin Chu		Transaction ID: 30b-21-11720-11720 Date of Disbursement 11 / 07 / 2006	
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 50.00	
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1380 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roland Englis		Transaction ID: 30b-21-11724-11724 Date of Disbursement 11 / 07 / 2006	
Mailing Address 37 Agatha Drive		Amount of Each Disbursement this Period 50.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Halima Seawright		Transaction ID: 30b-21-11747-11747 Date of Disbursement 11 / 07 / 2006	
Mailing Address 97 Delavan Street		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicholas H Fixmer		Transaction ID: 30b-21-11931-11931 Date of Disbursement 11 / 07 / 2006	
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 50.00	
City Scotch Plains State NJ Zip Code 07076	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicole Dirado		Transaction ID: 30b-21-11968-11968 Date of Disbursement 11 / 07 / 2006	
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nicole Dirado		Transaction ID: 30b-21-11969-11969 Date of Disbursement 11 / 07 / 2006	
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicole Dirado		Transaction ID: 30b-21-11970-11970 Date of Disbursement 11 / 07 / 2006	
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 50.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Nicole Dirado Full Name (Last, First, Middle Initial) Mailing Address 733 Greenwood Road City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11971-11971 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Ezzio Bustamante Full Name (Last, First, Middle Initial) Mailing Address 577 Morris Avenue City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11987-11987 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Ezzio Bustamante Full Name (Last, First, Middle Initial) Mailing Address 577 Morris Avenue City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-11988-11988 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sandra Espinal		Transaction ID: 30b-21-12296-12296 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 112 River Road		Amount of Each Disbursement this Period 50.00	
City North Arlington State NJ Zip Code 07031	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sandra Espinal		Transaction ID: 30b-21-12301-12301 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 112 River Road		Amount of Each Disbursement this Period 50.00	
City North Arlington State NJ Zip Code 07031	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sandra Espinal		Transaction ID: 30b-21-12310-12310 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 112 River Road		Amount of Each Disbursement this Period 50.00	
City North Arlington State NJ Zip Code 07031	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sandra Espinal		Transaction ID: 30b-21-12319-12319 Date of Disbursement 11 / 07 / 2006	
Mailing Address 112 River Road		Amount of Each Disbursement this Period 50.00	
City North Arlington State NJ Zip Code 07031	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sandra Espinal		Transaction ID: 30b-21-12330-12330 Date of Disbursement 11 / 07 / 2006	
Mailing Address 112 River Road		Amount of Each Disbursement this Period 50.00	
City North Arlington State NJ Zip Code 07031	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sandra Espinal		Transaction ID: 30b-21-12348-12348 Date of Disbursement 11 / 07 / 2006	
Mailing Address 112 River Road		Amount of Each Disbursement this Period 50.00	
City North Arlington State NJ Zip Code 07031	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	50.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Edward Kurylo		Transaction ID: 30b-21-12359-12359 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 978 Colonial Avenue		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. William Harris		Transaction ID: 30b-21-12360-12360 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 148 Front Street		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sebastian DELia		Transaction ID: 30b-21-12363-12363 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 Shady Lane		Amount of Each Disbursement this Period 100.00
City Fanwood State NJ Zip Code 07023	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1386 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael DeFilippo		Transaction ID: 30b-21-12364-12364 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00
City South Plainfield State NJ Zip Code 07080	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Wayne Avery		Transaction ID: 30b-21-12366-12366 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 815 Summer Street		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Melissa DeFilippo		Transaction ID: 30b-21-12367-12367 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00
City South Plainfield State NJ Zip Code 07080	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Sebastian DELia Full Name (Last, First, Middle Initial) Mailing Address 36 Shady Lane City Fanwood State NJ Zip Code 07023 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12368-12368 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Michael DeFilippo Full Name (Last, First, Middle Initial) Mailing Address 320 Arlington Avenue City South Plainfield State NJ Zip Code 07080 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12369-12369 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Wayne Avery Full Name (Last, First, Middle Initial) Mailing Address 815 Summer Street City Elizabeth State NJ Zip Code 07202 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12371-12371 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Rosemary McClave Full Name (Last, First, Middle Initial) Mailing Address 161 Virginia Street City Hillside State NJ Zip Code 07205 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12372-12372 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Ezzio Bustamante Full Name (Last, First, Middle Initial) Mailing Address 577 Morris Avenue City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12373-12373 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Edward Kurylo Full Name (Last, First, Middle Initial) Mailing Address 978 Colonial Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12376-12376 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Rosemary McClave Full Name (Last, First, Middle Initial) Mailing Address 161 Virginia Street City Hillside State NJ Zip Code 07205 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12377-12377 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Ezzio Bustamante Full Name (Last, First, Middle Initial) Mailing Address 577 Morris Avenue City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12378-12378 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Jack Gregory Full Name (Last, First, Middle Initial) Mailing Address 85 West Main Street City Rahway State NJ Zip Code 07065 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12379-12379 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Edward Kurylo		Transaction ID: 30b-21-12381-12381 Date of Disbursement 11 / 07 / 2006
Mailing Address 978 Colonial Avenue		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rosemary McClave		Transaction ID: 30b-21-12382-12382 Date of Disbursement 11 / 07 / 2006
Mailing Address 161 Virginia Street		Amount of Each Disbursement this Period 100.00
City Hillside State NJ Zip Code 07205	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hiver Ambrose		Transaction ID: 30b-21-12383-12383 Date of Disbursement 11 / 07 / 2006
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1391 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ronald Zuber Full Name (Last, First, Middle Initial) Mailing Address 15 Elm Street City Cranford State NJ Zip Code 07016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12384-12384 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. James Lowney Full Name (Last, First, Middle Initial) Mailing Address 330 West Jersey Street Apt 4D City Elizabeth State NJ Zip Code 07202 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12385-12385 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Rosemary McClave Full Name (Last, First, Middle Initial) Mailing Address 161 Virginia Street City Hillside State NJ Zip Code 07205 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12386-12386 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Barry Geller Full Name (Last, First, Middle Initial) Mailing Address 103 Schwin Drive City Clark State NJ Zip Code 07066 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12387-12387 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Melissa DeFilippo Full Name (Last, First, Middle Initial) Mailing Address 320 Arlington Avenue City South Plainfield State NJ Zip Code 07080 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12388-12388 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Tyrone Davis Full Name (Last, First, Middle Initial) Mailing Address 258 Inslee Place City Elizabeth State NJ Zip Code 07206 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12389-12389 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1393 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kelly Ann Coyle		Transaction ID: 30b-21-12391-12391 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 816 Emerson Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa DeFilippo		Transaction ID: 30b-21-12393-12393 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00
City South Plainfield State NJ Zip Code 07080		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tyrone Davis		Transaction ID: 30b-21-12394-12394 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 258 Inslee Place		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07206		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Abubakar Jalloh		Transaction ID: 30b-21-12398-12398 Date of Disbursement 11 / 07 / 2006	
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 100.00	
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Glenna Bowen		Transaction ID: 30b-21-12401-12401 Date of Disbursement 11 / 07 / 2006	
Mailing Address 215 Chaucer Drive		Amount of Each Disbursement this Period 100.00	
City Berkley Heights State NJ Zip Code 07922	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hiver Ambrose		Transaction ID: 30b-21-12402-12402 Date of Disbursement 11 / 07 / 2006	
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Glenna Bowen		Transaction ID: 30b-21-12405-12405 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 215 Chaucer Drive		Amount of Each Disbursement this Period 100.00
City State Zip Code Berkley Heights NJ 07922	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Christine Bodek		Transaction ID: 30b-21-12407-12407 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 311 West Henry Street		Amount of Each Disbursement this Period 100.00
City State Zip Code Linden NJ 07036	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mary Tomko		Transaction ID: 30b-21-12408-12408 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 328 Spruce Street		Amount of Each Disbursement this Period 100.00
City State Zip Code Linden NJ 07036	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicholas H Fixmer		Transaction ID: 30b-21-12409-12409 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 100.00
City State Zip Code Scotch Plains NJ 07076	Purpose of Disbursement Field Consulting Services Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Mary Tomko		Transaction ID: 30b-21-12415-12415 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 328 Spruce Street		Amount of Each Disbursement this Period 100.00
City State Zip Code Linden NJ 07036	Purpose of Disbursement Field Consulting Services Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. Cherron Roundtree		Transaction ID: 30b-21-12417-12417 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 82 Tudor Court		Amount of Each Disbursement this Period 100.00
City State Zip Code Springfield NJ 07081	Purpose of Disbursement Field Consulting Services Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Cherron Roundtree Full Name (Last, First, Middle Initial) Mailing Address 82 Tudor Court City Springfield State NJ Zip Code 07081 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12418-12418 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Edward T. Oatman Full Name (Last, First, Middle Initial) Mailing Address 14 East Green Street City Woodbridge State NJ Zip Code 07095 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12419-12419 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Joseph Bodek Full Name (Last, First, Middle Initial) Mailing Address 311 West Henry Street City Linden State NJ Zip Code 07036 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12420-12420 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Glenna Bowen		Transaction ID: 30b-21-12421-12421 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 215 Chaucer Drive		Amount of Each Disbursement this Period 100.00
City State Zip Code Berkley Heights NJ 07922	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Julian Buitnage		Transaction ID: 30b-21-12426-12426 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 366 Forest Avenue		Amount of Each Disbursement this Period 100.00
City State Zip Code Union NJ 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gerda Kurylo		Transaction ID: 30b-21-12428-12428 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 978 Colonial Avenue		Amount of Each Disbursement this Period 100.00
City State Zip Code Union NJ 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jessica Sheehy		Transaction ID: 30b-21-12430-12430 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 1031 Summit Terrace		Amount of Each Disbursement this Period 100.00	
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Amicis		Transaction ID: 30b-21-12431-12431 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 206 Morris Avenue		Amount of Each Disbursement this Period 100.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Abubakar Jalloh		Transaction ID: 30b-21-12432-12432 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 100.00	
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1400 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph Bodek		Transaction ID: 30b-21-12434-12434 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 311 West Henry Street		Amount of Each Disbursement this Period 100.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Christine Bodek		Transaction ID: 30b-21-12435-12435 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 311 West Henry Street		Amount of Each Disbursement this Period 100.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Ronald Bowen		Transaction ID: 30b-21-12445-12445 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 215 Chaucer Drive		Amount of Each Disbursement this Period 100.00
City Berkley Heights State NJ Zip Code 07922	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1401 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hiver Ambroise		Transaction ID: 30b-21-12446-12446 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carolyn Sullivan		Transaction ID: 30b-21-12448-12448 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Clover Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hiver Ambroise		Transaction ID: 30b-21-12449-12449 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1402 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Carolyn Sullivan Full Name (Last, First, Middle Initial) Mailing Address 118 Clover Street City Roselle State NJ Zip Code 07203 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12450-12450 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Julian Buitnage Full Name (Last, First, Middle Initial) Mailing Address 366 Forest Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12453-12453 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Hiver Ambrose Full Name (Last, First, Middle Initial) Mailing Address 857 Bailey Avenue City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12456-12456 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph Bodek		Transaction ID: 30b-21-12457-12457 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 311 West Henry Street		Amount of Each Disbursement this Period 100.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Hiver Ambrose		Transaction ID: 30b-21-12463-12463 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Adair Joseph		Transaction ID: 30b-21-12464-12464 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 583 Westminister Ave		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1404 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mohamed Jalloh		Transaction ID: 30b-21-12465-12465 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 127 Oakley Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Gerda Kurylo		Transaction ID: 30b-21-12466-12466 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 978 Colonial Avenue		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sandra Espinal		Transaction ID: 30b-21-12469-12469 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 112 River Road		Amount of Each Disbursement this Period 100.00
City North Arlington State NJ Zip Code 07031	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicholas H Fixmer		Transaction ID: 30b-21-12470-12470 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 100.00	
City Scotch Plains State NJ Zip Code 07076	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Keysha Tucker		Transaction ID: 30b-21-12471-12471 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 121 Magnolia Avenue		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07206	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Gerda Kurylo		Transaction ID: 30b-21-12474-12474 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 978 Colonial Avenue		Amount of Each Disbursement this Period 100.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Robert Fowler Full Name (Last, First, Middle Initial) Mailing Address 156 Park Place City Elizabeth State NJ Zip Code 07206 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12475-12475 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Abubakar Jalloh Full Name (Last, First, Middle Initial) Mailing Address 127 Oakly Street City Roselle State NJ Zip Code 07203 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12476-12476 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Gerda Kurylo Full Name (Last, First, Middle Initial) Mailing Address 978 Colonial Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12478-12478 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Amicis Full Name (Last, First, Middle Initial) Mailing Address 206 Morris Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12482-12482 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period: 100.00 Category/Type
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B. Hiver Ambroise Full Name (Last, First, Middle Initial) Mailing Address 857 Bailey Avenue City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12484-12484 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period: 100.00 Category/Type
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C. Mr. John Inc. Full Name (Last, First, Middle Initial) Mailing Address PO Box 130 City Keasbey State NJ Zip Code 08832 Purpose of Disbursement Office Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12486-12486 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period: 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Carolyn Sullivan Full Name (Last, First, Middle Initial) Mailing Address 118 Clover Street City Roselle State NJ Zip Code 07203 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12487-12487 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Mohamed Jalloh Full Name (Last, First, Middle Initial) Mailing Address 127 Oakley Street City Roselle State NJ Zip Code 07203 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12491-12491 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Amicis Full Name (Last, First, Middle Initial) Mailing Address 206 Morris Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12494-12494 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Amicis Full Name (Last, First, Middle Initial) Mailing Address 206 Morris Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12498-12498 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Amicis Full Name (Last, First, Middle Initial) Mailing Address 206 Morris Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12502-12502 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Jessica Sheehy Full Name (Last, First, Middle Initial) Mailing Address 1031 Summit Terrace City Linden State NJ Zip Code 07036 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12509-12509 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alfred Faella		Transaction ID: 30b-21-12512-12512 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 303 Old Tote Road		Amount of Each Disbursement this Period 100.00
City Mountainside State NJ Zip Code 07092	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Edward T. Oatman		Transaction ID: 30b-21-12513-12513 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 East Green Street		Amount of Each Disbursement this Period 100.00
City Woodbridge State NJ Zip Code 07095	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Carolyn Sullivan		Transaction ID: 30b-21-12515-12515 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Clover Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Carolyn Sullivan		Transaction ID: 30b-21-12516-12516 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 118 Clover Street		Amount of Each Disbursement this Period 100.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Hersheys of Westfield		Transaction ID: 30b-21-12517-12517 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 221 South Avenue		Amount of Each Disbursement this Period 100.00
City West Westfield State NJ Zip Code 07090	Purpose of Disbursement Food & Beverage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Hiver Ambrose		Transaction ID: 30b-21-12519-12519 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1412 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael DeFilippo		Transaction ID: 30b-21-12520-12520 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 320 Arlington Avenue		Amount of Each Disbursement this Period 100.00
City South Plainfield State NJ Zip Code 07080	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael Yuska		Transaction ID: 30b-21-12522-12522 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 151 West Lincoln Avenue		Amount of Each Disbursement this Period 100.00
City Roselle Park State NJ Zip Code 07204	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Matthew DiRado		Transaction ID: 30b-21-12523-12523 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1413 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Ryan Garner</p>		<p>Transaction ID: 30b-21-12524-12524 Date of Disbursement</p>	
<p>Mailing Address 337 Hazel Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City State Zip Code Garwood NJ 07027</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Ronald Bowen</p>		<p>Transaction ID: 30b-21-12526-12526 Date of Disbursement</p>	
<p>Mailing Address 215 Chaucer Drive</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City State Zip Code Berkley Heights NJ 07922</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Michael Yuska</p>		<p>Transaction ID: 30b-21-12527-12527 Date of Disbursement</p>	
<p>Mailing Address 151 West Lincoln Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City State Zip Code Roselle Park NJ 07204</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>		
<p>Purpose of Disbursement Field Consulting Services</p>	<p><input type="text" value=""/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="300.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1414 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Matthew DiRado Full Name (Last, First, Middle Initial) Mailing Address 733 Greenwood Road City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12528-12528 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Denise LaSpata Full Name (Last, First, Middle Initial) Mailing Address 717 Marcellus Drive City Westfield State NJ Zip Code 07090 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12529-12529 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Lakira Boston Full Name (Last, First, Middle Initial) Mailing Address 44 Hope Lane City Elizabeth State NJ Zip Code 07206 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12530-12530 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ronald Bowen		Transaction ID: 30b-21-12531-12531 Date of Disbursement 11 / 07 / 2006	
Mailing Address 215 Chaucer Drive		Amount of Each Disbursement this Period 100.00	
City Berkley Heights State NJ Zip Code 07922	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Julia Krajech		Transaction ID: 30b-21-12532-12532 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 Vine Street		Amount of Each Disbursement this Period 100.00	
City Hillside State NJ Zip Code 07205	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James Pelletiere		Transaction ID: 30b-21-12533-12533 Date of Disbursement 11 / 07 / 2006	
Mailing Address 36 East Grand Avenue #26		Amount of Each Disbursement this Period 100.00	
City Rahway State NJ Zip Code 07065	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Denise LaSpata		Transaction ID: 30b-21-12534-12534 Date of Disbursement 11 / 07 / 2006	
Mailing Address 717 Marcellus Drive		Amount of Each Disbursement this Period 100.00	
City Westfield State NJ Zip Code 07090	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Aliesha Davis		Transaction ID: 30b-21-12535-12535 Date of Disbursement 11 / 07 / 2006	
Mailing Address Apt 8F MRA Village Manor		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07206	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Murray		Transaction ID: 30b-21-12536-12536 Date of Disbursement 11 / 07 / 2006	
Mailing Address 529 Edgar Road		Amount of Each Disbursement this Period 100.00	
City Westfield State NJ Zip Code 07090	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Glenna Bowen		Transaction ID: 30b-21-12537-12537 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 215 Chaucer Drive		Amount of Each Disbursement this Period 100.00
City Berkley Heights State NJ Zip Code 07922	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. James Pellettiere		Transaction ID: 30b-21-12538-12538 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 East Grand Avenue #26		Amount of Each Disbursement this Period 100.00
City Rahway State NJ Zip Code 07065	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. James Lowney		Transaction ID: 30b-21-12539-12539 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 330 West Jersey Street Apt 4D		Amount of Each Disbursement this Period 100.00
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Murray		Transaction ID: 30b-21-12541-12541 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 529 Edgar Road		Amount of Each Disbursement this Period 100.00	
City Westfield State NJ Zip Code 07090	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Julia Krajech		Transaction ID: 30b-21-12542-12542 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 26 Vine Street		Amount of Each Disbursement this Period 100.00	
City Hillside State NJ Zip Code 07205	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James Lowney		Transaction ID: 30b-21-12544-12544 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 330 West Jersey Street Apt 4D		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Elizabeth Genievich		Transaction ID: 30b-21-12546-12546 Date of Disbursement 11 / 07 / 2006	
Mailing Address 408 Inwood Road		Amount of Each Disbursement this Period 100.00	
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Julia Krajech		Transaction ID: 30b-21-12547-12547 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 Vine Street		Amount of Each Disbursement this Period 100.00	
City Hillside State NJ Zip Code 07205	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hiver Ambrose		Transaction ID: 30b-21-12548-12548 Date of Disbursement 11 / 07 / 2006	
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1420 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alfred Faella		Transaction ID: 30b-21-12549-12549 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 303 Old Tote Road		Amount of Each Disbursement this Period 100.00
City Mountainside State NJ Zip Code 07092	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ronald Zuber		Transaction ID: 30b-21-12550-12550 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 15 Elm Street		Amount of Each Disbursement this Period 100.00
City Cranford State NJ Zip Code 07016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Evelio Salerno		Transaction ID: 30b-21-12551-12551 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 431 Durling Road		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1421 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alfred Faella		Transaction ID: 30b-21-12552-12552 Date of Disbursement 11 / 07 / 2006	
Mailing Address 303 Old Tote Road		Amount of Each Disbursement this Period 100.00	
City Mountainside State NJ Zip Code 07092	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Yuska		Transaction ID: 30b-21-12553-12553 Date of Disbursement 11 / 07 / 2006	
Mailing Address 151 West Lincoln Avenue		Amount of Each Disbursement this Period 100.00	
City Roselle Park State NJ Zip Code 07204	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ronald Zuber		Transaction ID: 30b-21-12554-12554 Date of Disbursement 11 / 07 / 2006	
Mailing Address 15 Elm Street		Amount of Each Disbursement this Period 100.00	
City Cranford State NJ Zip Code 07016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1422 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ronald Zuber Full Name (Last, First, Middle Initial) Mailing Address 15 Elm Street City Cranford State NJ Zip Code 07016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12555-12555 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Amicis Full Name (Last, First, Middle Initial) Mailing Address 206 Morris Avenue City Union State NJ Zip Code 07083 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12556-12556 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Michael Yuska Full Name (Last, First, Middle Initial) Mailing Address 151 West Lincoln Avenue City Roselle Park State NJ Zip Code 07204 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12557-12557 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1423 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sebastian DELia		Transaction ID: 30b-21-12558-12558 Date of Disbursement 11 / 07 / 2006	
Mailing Address 36 Shady Lane		Amount of Each Disbursement this Period 100.00	
City Fanwood State NJ Zip Code 07023	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sebastian DELia		Transaction ID: 30b-21-12559-12559 Date of Disbursement 11 / 07 / 2006	
Mailing Address 36 Shady Lane		Amount of Each Disbursement this Period 100.00	
City Fanwood State NJ Zip Code 07023	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Amicis		Transaction ID: 30b-21-12560-12560 Date of Disbursement 11 / 07 / 2006	
Mailing Address 206 Morris Avenue		Amount of Each Disbursement this Period 100.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Food & Beverage	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1424 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael Yuska Full Name (Last, First, Middle Initial) Mailing Address 151 West Lincoln Avenue City Roselle Park State NJ Zip Code 07204 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12561-12561 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Ronald Zuber Full Name (Last, First, Middle Initial) Mailing Address 15 Elm Street City Cranford State NJ Zip Code 07016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12562-12562 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Michael Murray Full Name (Last, First, Middle Initial) Mailing Address 529 Edgar Road City Westfield State NJ Zip Code 07090 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12563-12563 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ronald Zuber Full Name (Last, First, Middle Initial) Mailing Address 15 Elm Street City Cranford State NJ Zip Code 07016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12564-12564 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Cherron Roundtree Full Name (Last, First, Middle Initial) Mailing Address 82 Tudor Court City Springfield State NJ Zip Code 07081 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12565-12565 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Ronald Bowen Full Name (Last, First, Middle Initial) Mailing Address 215 Chaucer Drive City Berkley Heights State NJ Zip Code 07922 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12566-12566 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ronald Zuber		Transaction ID: 30b-21-12567-12567 Date of Disbursement 11 / 07 / 2006	
Mailing Address 15 Elm Street		Amount of Each Disbursement this Period 100.00	
City Cranford State NJ Zip Code 07016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Hiver Ambroise		Transaction ID: 30b-21-12568-12568 Date of Disbursement 11 / 07 / 2006	
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00	
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Julia Krajech		Transaction ID: 30b-21-12569-12569 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 Vine Street		Amount of Each Disbursement this Period 100.00	
City Hillside State NJ Zip Code 07205	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Julia Krajech		Transaction ID: 30b-21-12570-12570 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 Vine Street		Amount of Each Disbursement this Period 100.00	
City Hillside	State NJ	Zip Code 07205	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Hiver Ambrose		Transaction ID: 30b-21-12571-12571 Date of Disbursement 11 / 07 / 2006	
Mailing Address 857 Bailey Avenue		Amount of Each Disbursement this Period 100.00	
City Elizabeth	State NJ	Zip Code 07208	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. James Lowney		Transaction ID: 30b-21-12572-12572 Date of Disbursement 11 / 07 / 2006	
Mailing Address 330 West Jersey Street Apt 4D		Amount of Each Disbursement this Period 100.00	
City Elizabeth	State NJ	Zip Code 07202	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Carolyn Sullivan Full Name (Last, First, Middle Initial) Mailing Address 118 Clover Street City Roselle State NJ Zip Code 07203 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12574-12574 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Ronald Bowen Full Name (Last, First, Middle Initial) Mailing Address 215 Chaucer Drive City Berkley Heights State NJ Zip Code 07922 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12577-12577 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Marvin Goodson Full Name (Last, First, Middle Initial) Mailing Address 540 Park Avenue Apt. 12 City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-12629-12629 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 85.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ► 285.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Rollins		Transaction ID: 30b-21-12630-12630	
Mailing Address 86 Madonna Place		Date of Disbursement 11 / 07 / 2006	
City East Orange	State NJ	Zip Code 07017	Amount of Each Disbursement this Period 85.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Sherman Hampton		Transaction ID: 30b-21-13126-13126	
Mailing Address 22 Elm St.		Date of Disbursement 11 / 07 / 2006	
City Salem	State NJ	Zip Code 08079	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Dawn Gunter		Transaction ID: 30b-21-13128-13128	
Mailing Address 60 Almond Road		Date of Disbursement 11 / 07 / 2006	
City Pittsgrove	State NJ	Zip Code 08318	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	285.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lisa Luster		Transaction ID: 30b-21-13132-13132 Date of Disbursement 11 / 07 / 2006	
Mailing Address 566 Yale Avenue		Amount of Each Disbursement this Period 100.00	
City Millville	State NJ	Zip Code 08332	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Timothy Luster		Transaction ID: 30b-21-13133-13133 Date of Disbursement 11 / 07 / 2006	
Mailing Address 830 East Elmer Street		Amount of Each Disbursement this Period 100.00	
City Vineland	State NJ	Zip Code 08360	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Joann Purnell		Transaction ID: 30b-21-13134-13134 Date of Disbursement 11 / 07 / 2006	
Mailing Address 112 Higgins Dr.		Amount of Each Disbursement this Period 100.00	
City Glassboro	State NJ	Zip Code 08028	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clara Luster		Transaction ID: 30b-21-13135-13135 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2237 Helen Avenue		Amount of Each Disbursement this Period 100.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kevin Adams		Transaction ID: 30b-21-13137-13137 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 301 North Wade Boulevard Apt 308		Amount of Each Disbursement this Period 100.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tania Jones		Transaction ID: 30b-21-13169-13169 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 727 Magnolia Road		Amount of Each Disbursement this Period 25.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ebony Williams		Transaction ID: 30b-21-13180-13180 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 184 Lawrence Street		Amount of Each Disbursement this Period 25.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Darnell Johnson		Transaction ID: 30b-21-13192-13192 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 13 Kloster Boulevard Apt 7C		Amount of Each Disbursement this Period 25.00
City Edison State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tanya Santiago		Transaction ID: 30b-21-13204-13204 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1075 Hamilton Street		Amount of Each Disbursement this Period 25.00
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1433 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Abdul Glover		Transaction ID: 30b-21-13206-13206 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 25.00	
City New Brunswick	State NJ	Zip Code 08901	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rachel Elfenbein		Transaction ID: 30b-21-13207-13207 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Loweland Drive		Amount of Each Disbursement this Period 25.00	
City Mountain Lakes	State NJ	Zip Code 07046	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Yin Chu		Transaction ID: 30b-21-13226-13226 Date of Disbursement 11 / 07 / 2006	
Mailing Address 580 Hickory Street		Amount of Each Disbursement this Period 25.00	
City Ridgewood	State NJ	Zip Code 07450	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roland Englis		Transaction ID: 30b-21-13241-13241 Date of Disbursement 11 / 07 / 2006	
Mailing Address 37 Agatha Drive		Amount of Each Disbursement this Period 25.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sonya Booker		Transaction ID: 30b-21-13246-13246 Date of Disbursement 11 / 07 / 2006	
Mailing Address 29 Riverside Drive		Amount of Each Disbursement this Period 25.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tatiana Ruiz		Transaction ID: 30b-21-13531-13531 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1 Marion Street Apt 2		Amount of Each Disbursement this Period 35.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	85.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ruth Perez Full Name (Last, First, Middle Initial) Mailing Address 85 South State Street City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-13578-13578 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 35.00 Category/Type
--	--	--

B. Angye Chima Full Name (Last, First, Middle Initial) Mailing Address 26 Pulaski Place City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-13600-13600 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 35.00 Category/Type
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C. Keith C Carbone Full Name (Last, First, Middle Initial) Mailing Address 532 Ryeside Avenue City New Milford State NJ Zip Code 07646 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-13884-13884 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 35.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ace F. Laluces		Transaction ID: 30b-21-13885-13885 Date of Disbursement 11 / 07 / 2006
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 35.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Duban Moreno		Transaction ID: 30b-21-13887-13887 Date of Disbursement 11 / 07 / 2006
Mailing Address 469 Jackson Avenue		Amount of Each Disbursement this Period 35.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ruth Perez		Transaction ID: 30b-21-13897-13897 Date of Disbursement 11 / 07 / 2006
Mailing Address 85 South State Street		Amount of Each Disbursement this Period 35.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Noble Lester		Transaction ID: 30b-21-14311-14311 Date of Disbursement 11 / 07 / 2006
Mailing Address 21 Euclid Avenue		Amount of Each Disbursement this Period 35.00
City Hackensack State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Angye Chima		Transaction ID: 30b-21-14343-14343 Date of Disbursement 11 / 07 / 2006
Mailing Address 26 Pulaski Place		Amount of Each Disbursement this Period 35.00
City Hackensack State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Duban Moreno		Transaction ID: 30b-21-14420-14420 Date of Disbursement 11 / 07 / 2006
Mailing Address 469 Jackson Avenue		Amount of Each Disbursement this Period 35.00
City Hackensack State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jayson Reyes		Transaction ID: 30b-21-14509-14509 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2520 Leslie Street		Amount of Each Disbursement this Period 35.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tatiana Ruiz		Transaction ID: 30b-21-14512-14512 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1 Marion Street Apt 2		Amount of Each Disbursement this Period 35.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Maria Lopez		Transaction ID: 30b-21-15209-15209 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 268 Hudson Street		Amount of Each Disbursement this Period 35.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tatiana Ruiz		Transaction ID: 30b-21-15228-15228 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 1 Marion Street Apt 2		Amount of Each Disbursement this Period 35.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Kevin Adams		Transaction ID: 30b-21-15897-15897 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 301 North Wade Boulevard Apt 308		Amount of Each Disbursement this Period 75.00	
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Ashir Khondker		Transaction ID: 30b-21-15943-15943 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 1423 South 4th Street		Amount of Each Disbursement this Period 75.00	
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	185.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Ward		Transaction ID: 30b-21-15945-15945 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2121 Bancroft Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19148	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jeff Mott		Transaction ID: 30b-21-15949-15949 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 581 General Know Road		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19406	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Christopher Hayden		Transaction ID: 30b-21-15951-15951 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1413 South 4th Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jennifer Rice		Transaction ID: 30b-21-15952-15952 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1423 South 4th Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Saul Delvalle		Transaction ID: 30b-21-15959-15959 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 205 East Monmouth Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19134	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. J. Richard Winborne		Transaction ID: 30b-21-15963-15963 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 215 South 49th Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19139	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Regina Cooper		Transaction ID: 30b-21-15971-15971 Date of Disbursement 11 / 07 / 2006
Mailing Address 3862 West Frankin		Amount of Each Disbursement this Period 75.00
City Philadelphia	State PA Zip Code 19146	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Dana Wheeler		Transaction ID: 30b-21-15978-15978 Date of Disbursement 11 / 07 / 2006
Mailing Address 1420 North 32nd Street		Amount of Each Disbursement this Period 75.00
City Philadelphia	State PA Zip Code 19134	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Genevieve Abrams		Transaction ID: 30b-21-15979-15979 Date of Disbursement 11 / 07 / 2006
Mailing Address 2412 North Pallor		Amount of Each Disbursement this Period 75.00
City Philadelphia	State PA Zip Code 19132	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Deborah Wheeler		Transaction ID: 30b-21-15980-15980 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2420 North 32nd Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Matthew Chase		Transaction ID: 30b-21-16008-16008 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1600 North Broad Street #717		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Megan Blackburn		Transaction ID: 30b-21-16029-16029 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2029 North Broad Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19122	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Trevor Polk		Transaction ID: 30b-21-16044-16044 Date of Disbursement 11 / 07 / 2006
Mailing Address 30 Gylnn Court		Amount of Each Disbursement this Period 75.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kali Milgate		Transaction ID: 30b-21-16046-16046 Date of Disbursement 11 / 07 / 2006
Mailing Address 1300 Cecil B. Moore Ave S104		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19122	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Latesha Rucker		Transaction ID: 30b-21-16047-16047 Date of Disbursement 11 / 07 / 2006
Mailing Address 116 North 51st Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19139	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clinton Thomas		Transaction ID: 30b-21-16065-16065 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3236 West Berk Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. April Pinder		Transaction ID: 30b-21-16066-16066 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 4277 Leidy Lane		Amount of Each Disbursement this Period 75.00
City Philadephia State PA Zip Code 19140	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Octavia Smith		Transaction ID: 30b-21-16067-16067 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3131 West Montgomery Avenue		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Zykia Wright		Transaction ID: 30b-21-16070-16070 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 5934 North 12th Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19141	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Trina Rivers		Transaction ID: 30b-21-16091-16091 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3120 North Sheridan		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Guy Collina		Transaction ID: 30b-21-16108-16108 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1320 South Divinity Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19143	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph Smith		Transaction ID: 30b-21-16124-16124 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1614 South 27th Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19102	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Soyni Grimes		Transaction ID: 30b-21-16134-16134 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3845 North Franklin Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19122	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Franklin Owens		Transaction ID: 30b-21-16150-16150 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 122 Harrington Lane		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Joel Romulus</p>		<p>Transaction ID: 30b-21-16153-16153 Date of Disbursement</p>	
<p>Mailing Address 27 Bonnie Lane</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Willingboro</p>	<p>State NJ</p>	<p>Zip Code 08046</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>B. Full Name (Last, First, Middle Initial) Edward M. McFadden</p>		<p>Transaction ID: 30b-21-16155-16155 Date of Disbursement</p>	
<p>Mailing Address 92 Club House Drive</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Willingboro</p>	<p>State NJ</p>	<p>Zip Code 08046</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

<p>C. Full Name (Last, First, Middle Initial) Selia A. McFadden</p>		<p>Transaction ID: 30b-21-16156-16156 Date of Disbursement</p>	
<p>Mailing Address 92 Club House Drive</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Willingboro</p>	<p>State NJ</p>	<p>Zip Code 08046</p>	
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. David Linder		Transaction ID: 30b-21-16159-16159 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 211 Colonial Road		Amount of Each Disbursement this Period 75.00
City Edgewater Park State NJ Zip Code 08010	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Donovan Linder		Transaction ID: 30b-21-16160-16160 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 211 Colonial Road		Amount of Each Disbursement this Period 75.00
City Edgewater Park State NJ Zip Code 08010	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Constance Mitz-Linder		Transaction ID: 30b-21-16161-16161 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 211 Colonial Road		Amount of Each Disbursement this Period 75.00
City Edgewater Park State NJ Zip Code 08010	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Raafi Allgood		Transaction ID: 30b-21-16163-16163 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 64 Bolton Lane		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ravon McCurry		Transaction ID: 30b-21-16164-16164 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 110 Stacey Court		Amount of Each Disbursement this Period 75.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Walter Howard Jr.		Transaction ID: 30b-21-16165-16165 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 6 Indian Lane		Amount of Each Disbursement this Period 75.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cathy McRae		Transaction ID: 30b-21-16173-16173 Date of Disbursement 11 / 07 / 2006	
Mailing Address 34 Hamilton Lane		Amount of Each Disbursement this Period 75.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mamon Bey		Transaction ID: 30b-21-16182-16182 Date of Disbursement 11 / 07 / 2006	
Mailing Address 201 Lawrence Street		Amount of Each Disbursement this Period 75.00	
City Cherry Hill State NJ Zip Code 08002	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Darlene Gleaves		Transaction ID: 30b-21-16195-16195 Date of Disbursement 11 / 07 / 2006	
Mailing Address 19 Ronald Drive		Amount of Each Disbursement this Period 75.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kenneth Burnett		Transaction ID: 30b-21-16210-16210 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 124 Penny Packer Drive		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kenneth Burnett		Transaction ID: 30b-21-16211-16211 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 124 Penny Packer Drive		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Earl Johnson		Transaction ID: 30b-21-16212-16212 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 38 Gramercy Lane		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Quiana Gleaves		Transaction ID: 30b-21-16228-16228 Date of Disbursement 11 / 07 / 2006	
Mailing Address 19 Ronald Drive		Amount of Each Disbursement this Period 75.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Glenda Stribling		Transaction ID: 30b-21-16231-16231 Date of Disbursement 11 / 07 / 2006	
Mailing Address 27 Eflend Lane		Amount of Each Disbursement this Period 75.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Elayna Stribling		Transaction ID: 30b-21-16232-16232 Date of Disbursement 11 / 07 / 2006	
Mailing Address 15 Quincy Manor Lane		Amount of Each Disbursement this Period 75.00	
City Burlington State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marques Hayes		Transaction ID: 30b-21-16234-16234 Date of Disbursement 11 / 07 / 2006
Mailing Address 53 Melville Lane		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Walter Howard		Transaction ID: 30b-21-16241-16241 Date of Disbursement 11 / 07 / 2006
Mailing Address 8 Latmore		Amount of Each Disbursement this Period 75.00
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mildred Stribling		Transaction ID: 30b-21-16246-16246 Date of Disbursement 11 / 07 / 2006
Mailing Address 38 Hamilton Lane		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Margo D. Thomas		Transaction ID: 30b-21-16262-16262 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 400 High Street #402		Amount of Each Disbursement this Period 75.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Robert Thomas		Transaction ID: 30b-21-16263-16263 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 400 High Street #402		Amount of Each Disbursement this Period 75.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Foster		Transaction ID: 30b-21-16265-16265 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 31 Tweedstone Lane		Amount of Each Disbursement this Period 75.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mikole Burke-Anderson		Transaction ID: 30b-21-16269-16269 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 39 Country Club		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Maurice Anderson		Transaction ID: 30b-21-16270-16270 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 39 Country Club		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. John Foster		Transaction ID: 30b-21-16306-16306 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 31 Tweedstone Lane		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Constance Hayes		Transaction ID: 30b-21-16319-16319 Date of Disbursement 11 / 07 / 2006
Mailing Address 53 Melville Lane		Amount of Each Disbursement this Period 75.00
City Willingboro	State NJ Zip Code 08046	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Threasa Ackles-Cope		Transaction ID: 30b-21-16323-16323 Date of Disbursement 11 / 07 / 2006
Mailing Address 110 Wall Street		Amount of Each Disbursement this Period 75.00
City Burlington	State NJ Zip Code 08016	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Beverly Ackles		Transaction ID: 30b-21-16324-16324 Date of Disbursement 11 / 07 / 2006
Mailing Address 108 Wall Street		Amount of Each Disbursement this Period 75.00
City Burlington	State NJ Zip Code 08046	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Greg Ackles		Transaction ID: 30b-21-16325-16325 Date of Disbursement 11 / 07 / 2006	
Mailing Address 108 Wall Street		Amount of Each Disbursement this Period 75.00	
City Burlington State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Robert Clayton		Transaction ID: 30b-21-16372-16372 Date of Disbursement 11 / 07 / 2006	
Mailing Address 14 Walnut Drive		Amount of Each Disbursement this Period 75.00	
City Burlington Twp State NJ Zip Code 08016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Myra Arroyo		Transaction ID: 30b-21-16383-16383 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1711 Heather Place		Amount of Each Disbursement this Period 75.00	
City Clementon State NJ Zip Code 08021	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Paul Olszewski		Transaction ID: 30b-21-16385-16385 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 321 Huntington Avenue		Amount of Each Disbursement this Period 75.00
City Glendora State NJ Zip Code 08029	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Danielle Garcia		Transaction ID: 30b-21-16388-16388 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1141 Sheridan Avenue		Amount of Each Disbursement this Period 75.00
City Bellmawr State NJ Zip Code 08031	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Joshua Bateman		Transaction ID: 30b-21-16389-16389 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 412 Broadway Avenue		Amount of Each Disbursement this Period 75.00
City Westville State NJ Zip Code 08093	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Alecknavage		Transaction ID: 30b-21-16392-16392 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 167 Peregrine Drive		Amount of Each Disbursement this Period 75.00
City Voorhees State NJ Zip Code 08043	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Eric Wachter		Transaction ID: 30b-21-16409-16409 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 19 East Broad Street Apt B		Amount of Each Disbursement this Period 75.00
City Palmyra State NJ Zip Code 08065	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kimberly Kern		Transaction ID: 30b-21-16421-16421 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 615 Walnut Avenue		Amount of Each Disbursement this Period 75.00
City Laurel Springs State NJ Zip Code 08021	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Connie DeLeon		Transaction ID: 30b-21-16427-16427 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 10 Prentis Court		Amount of Each Disbursement this Period 75.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kristen DiVenti		Transaction ID: 30b-21-16428-16428 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 33 Natur Lane		Amount of Each Disbursement this Period 75.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Judith Dutton		Transaction ID: 30b-21-16471-16471 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 75.00
City Franklinville State NJ Zip Code 08322	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kyle Dutton		Transaction ID: 30b-21-16472-16472 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 75.00
City Franklinville State NJ Zip Code 08322	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marc Garcia		Transaction ID: 30b-21-16475-16475 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 311 North Elmwood Road		Amount of Each Disbursement this Period 75.00
City Marlton State NJ Zip Code 08053	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Monique Parker		Transaction ID: 30b-21-16506-16506 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 411 East Gibbsboro Road, Apartment		Amount of Each Disbursement this Period 75.00
City Lindenwold State NJ Zip Code 08021	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maraud Pemberton		Transaction ID: 30b-21-16507-16507 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 26 Joseph Drive		Amount of Each Disbursement this Period 75.00
City Sewell State NJ Zip Code 08080	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Daniel Wright		Transaction ID: 30b-21-16528-16528 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 862 Longwood Circle		Amount of Each Disbursement this Period 75.00
City Haddonfield State NJ Zip Code 08033	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jaideep Sen		Transaction ID: 30b-21-16535-16535 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 63 Bunning Drive		Amount of Each Disbursement this Period 75.00
City Voorhees State NJ Zip Code 08043	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Donald Jones		Transaction ID: 30b-21-16555-16555 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2026 S 7th Street		Amount of Each Disbursement this Period 75.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bernadette Williams		Transaction ID: 30b-21-16557-16557 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1118 Lake Shore Drive		Amount of Each Disbursement this Period 75.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kim Grant		Transaction ID: 30b-21-16569-16569 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1579 Collins Avenue		Amount of Each Disbursement this Period 75.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Patricia Williams		Transaction ID: 30b-21-16574-16574 Date of Disbursement 11 / 07 / 2006
Mailing Address 44 Branch Village		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Linda Crisdon		Transaction ID: 30b-21-16584-16584 Date of Disbursement 11 / 07 / 2006
Mailing Address 500 North 7th Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Thelma Coles		Transaction ID: 30b-21-16586-16586 Date of Disbursement 11 / 07 / 2006
Mailing Address 1278 Lakeshore Drive		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gladys Gibbs		Transaction ID: 30b-21-16595-16595 Date of Disbursement 11 / 07 / 2006	
Mailing Address 326 Spruce Street		Amount of Each Disbursement this Period 75.00	
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ivan Foster		Transaction ID: 30b-21-16618-16618 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1258 Browning Street		Amount of Each Disbursement this Period 75.00	
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vardalareise Green		Transaction ID: 30b-21-16620-16620 Date of Disbursement 11 / 07 / 2006	
Mailing Address 110 Columbia Drive		Amount of Each Disbursement this Period 75.00	
City Atco State NJ Zip Code 08004	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Audrey Ferguson		Transaction ID: 30b-21-16629-16629 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 433 North 7th Street apt 77		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ashleen Lopez		Transaction ID: 30b-21-16634-16634 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1244 Browning Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ashleen Lopez		Transaction ID: 30b-21-16635-16635 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1244 Browning Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ashleen Lopez		Transaction ID: 30b-21-16636-16636 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1244 Browning Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Charlene Abel		Transaction ID: 30b-21-16637-16637 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 813 Chelton Ave E8		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Isreal Laguer		Transaction ID: 30b-21-16640-16640 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 635 Vine Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Isreal Laguer		Transaction ID: 30b-21-16641-16641 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 635 Vine Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Isreal Laguer		Transaction ID: 30b-21-16642-16642 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 635 Vine Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Janeen Williams		Transaction ID: 30b-21-16653-16653 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1066 Lake Shore Drive		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08102	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marie Dunlap-Price		Transaction ID: 30b-21-16655-16655 Date of Disbursement 11 / 07 / 2006
Mailing Address 1272 Magnolia Avenue		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marie Dunlap-Price		Transaction ID: 30b-21-16656-16656 Date of Disbursement 11 / 07 / 2006
Mailing Address 1272 Magnolia Avenue		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ivan Foster		Transaction ID: 30b-21-16663-16663 Date of Disbursement 11 / 07 / 2006
Mailing Address 1258 Browning Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Ivan Foster		Transaction ID: 30b-21-16664-16664 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1258 Browning Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Ivan Foster		Transaction ID: 30b-21-16667-16667 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1258 Browning Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Ivan Foster		Transaction ID: 30b-21-16672-16672 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1258 Browning Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Dale Bailey</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1342 Sheridan Street</p> <p>City Camden State NJ Zip Code 08103</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-16675-16675</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Vance Bowman</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3149 Mount Ephraim Avenue</p> <p>City Camden State NJ Zip Code 08103</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-16678-16678</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Joan Mikals</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 36 Reed Street</p> <p>City Newark State NJ Zip Code 07105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-16979-16979</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="225.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anthony Machado		Transaction ID: 30b-21-16982-16982 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 78 Jackson Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Maria Silva		Transaction ID: 30b-21-16986-16986 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 414 Walnut Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Fatima Zema		Transaction ID: 30b-21-16988-16988 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 106 Street Francis Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joan Abim		Transaction ID: 30b-21-16991-16991 Date of Disbursement 11 / 07 / 2006	
Mailing Address 251 Walnut Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Booker Martin		Transaction ID: 30b-21-17031-17031 Date of Disbursement 11 / 07 / 2006	
Mailing Address 68 Hawkins Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Carmen Napadano		Transaction ID: 30b-21-17035-17035 Date of Disbursement 11 / 07 / 2006	
Mailing Address 214 Maluern Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Esther James		Transaction ID: 30b-21-17037-17037 Date of Disbursement 11 / 07 / 2006
Mailing Address 75 Garrison Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rosemary Lopez		Transaction ID: 30b-21-17041-17041 Date of Disbursement 11 / 07 / 2006
Mailing Address 249 Adams Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Michael Kerton		Transaction ID: 30b-21-17048-17048 Date of Disbursement 11 / 07 / 2006
Mailing Address 1080 Broad Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07102	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Israel Torres		Transaction ID: 30b-21-17050-17050 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 24 Parkhurst Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07114	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. George Romero		Transaction ID: 30b-21-17051-17051 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 144 Union Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Maria Vincent		Transaction ID: 30b-21-17060-17060 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 96 Garrison Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jerry Chapusette		Transaction ID: 30b-21-17079-17079 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 Warsassing Avenue		Amount of Each Disbursement this Period 75.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Osagie Ekenezar		Transaction ID: 30b-21-17081-17081 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 301 Rose Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Milton Duran		Transaction ID: 30b-21-17108-17108 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) John Patino		Transaction ID: 30b-21-17109-17109 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 641 North 9th Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ivette Robles		Transaction ID: 30b-21-17112-17112 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 266 Parker Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Javier Caicedo		Transaction ID: 30b-21-17117-17117 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 127 Sylvan Avenue		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Luis Casanova		Transaction ID: 30b-21-17121-17121 Date of Disbursement 11 / 07 / 2006	
Mailing Address 74 Kearney Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dharryl Laurente		Transaction ID: 30b-21-17135-17135 Date of Disbursement 11 / 07 / 2006	
Mailing Address 72 Kirk Street		Amount of Each Disbursement this Period 75.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Stephen Maisonave		Transaction ID: 30b-21-17137-17137 Date of Disbursement 11 / 07 / 2006	
Mailing Address 107 N. 10th Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jose Ortiz		Transaction ID: 30b-21-17138-17138 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 127 N. 15th Street		Amount of Each Disbursement this Period 75.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Evelyn Collazo		Transaction ID: 30b-21-17152-17152 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 256 Orange Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Pablo Reyes		Transaction ID: 30b-21-17160-17160 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 61 South 11th Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eric Gomez		Transaction ID: 30b-21-17258-17258 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 621 Belleville Avenue		Amount of Each Disbursement this Period 75.00
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Anibal Alcantara		Transaction ID: 30b-21-17276-17276 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 15 Heller Parkway		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Wilma Leslie		Transaction ID: 30b-21-17279-17279 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 28 Street. Paul Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kenneth Graves Full Name (Last, First, Middle Initial) Mailing Address 164 Steuben Street City East Orange State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17309-17309 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Barry Anthony Full Name (Last, First, Middle Initial) Mailing Address 164 Muhammad Avenue City Newark State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17312-17312 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Richard Williams Full Name (Last, First, Middle Initial) Mailing Address 162 Muhammad Ali Avenue City Newark State NJ Zip Code 07108 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17313-17313 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. John Williams Full Name (Last, First, Middle Initial) Mailing Address 11 Lincoln Park Apt 31 City Newark State NJ Zip Code 07102 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17323-17323 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Annie Bethea Full Name (Last, First, Middle Initial) Mailing Address 515 Elizabeth Avenue 17-E City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17330-17330 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Yvonne Stafford Full Name (Last, First, Middle Initial) Mailing Address 92 7th Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17335-17335 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Slater		Transaction ID: 30b-21-17337-17337 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 268 Prospect Street Apt 2F		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Olivette Willis		Transaction ID: 30b-21-17338-17338 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 495 Bergen Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Stanley Willis		Transaction ID: 30b-21-17339-17339 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 495 Bergen Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stephen McAllister		Transaction ID: 30b-21-17342-17342 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 279 Ridgewood Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Renee Covington		Transaction ID: 30b-21-17346-17346 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 279 Ridgewood Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Robin Williams		Transaction ID: 30b-21-17347-17347 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 185 James Street Apt. 3A		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mike Copeland		Transaction ID: 30b-21-17348-17348 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 210 Richelieu Terrace		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Rollins		Transaction ID: 30b-21-17349-17349 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lyndale Jackson		Transaction ID: 30b-21-17427-17427 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 492 Park Avenue		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jessica Jones Full Name (Last, First, Middle Initial) Mailing Address 17 Kotik Place 1st Floor City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17432-17432 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Tim Sporic Full Name (Last, First, Middle Initial) Mailing Address 400 South Orange Avenue City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17434-17434 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Howard Hurst Full Name (Last, First, Middle Initial) Mailing Address 2572 N Sussem City New Hope State NJ Zip Code 18938 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17439-17439 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Teresa Korbmesmeyer		Transaction ID: 30b-21-17454-17454 Date of Disbursement 11 / 07 / 2006	
Mailing Address 400 South Orange Ave		Amount of Each Disbursement this Period 75.00	
City South Orange State NJ Zip Code 07079	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Sergio Carrero		Transaction ID: 30b-21-17504-17504 Date of Disbursement 11 / 07 / 2006	
Mailing Address 228 Boyle Avenue		Amount of Each Disbursement this Period 75.00	
City Totowa State NJ Zip Code 07512	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Lauren Lewis		Transaction ID: 30b-21-17505-17505 Date of Disbursement 11 / 07 / 2006	
Mailing Address 39 Hughes Place		Amount of Each Disbursement this Period 75.00	
City Little Falls State NJ Zip Code 07424	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adrianna Rockford		Transaction ID: 30b-21-17523-17523 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 112 Ray Street		Amount of Each Disbursement this Period 75.00
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Dominique Shipley		Transaction ID: 30b-21-17554-17554 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 143 Claremont Avenue		Amount of Each Disbursement this Period 75.00
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Quan Miller		Transaction ID: 30b-21-17559-17559 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 259 Reynolds Terrace, Apt#B7		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sparkle Conover		Transaction ID: 30b-21-17562-17562	
Mailing Address 86 Madonna Place		Date of Disbursement 11 / 07 / 2006	
City East Orange	State NJ	Zip Code 07017	Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Dante Rollins		Transaction ID: 30b-21-17563-17563	
Mailing Address 86 Madonna Place		Date of Disbursement 11 / 07 / 2006	
City East Orange	State NJ	Zip Code 07017	Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Linda King		Transaction ID: 30b-21-17564-17564	
Mailing Address 97 Willowdale Avenue		Date of Disbursement 11 / 07 / 2006	
City Montclair	State NJ	Zip Code 07042	Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Kidd		Transaction ID: 30b-21-17565-17565 Date of Disbursement 11 / 07 / 2006
Mailing Address 65 Headley Terrace, Apt # 1-B		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Sharon Browning		Transaction ID: 30b-21-17566-17566 Date of Disbursement 11 / 07 / 2006
Mailing Address 523 Prospect Street, Apt #9		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Javier Morales		Transaction ID: 30b-21-17583-17583 Date of Disbursement 11 / 07 / 2006
Mailing Address 40 West Kinney Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07102	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Molly Holzbauer Full Name (Last, First, Middle Initial) Mailing Address 400 South Orange Avenue Suite 259 City South Orange State NJ Zip Code 07079 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17591-17591 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Joyce Quijano Full Name (Last, First, Middle Initial) Mailing Address 38 Ravine Avenue City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17597-17597 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Ashley Romero Full Name (Last, First, Middle Initial) Mailing Address 73 Bellair Place City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17606-17606 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Melina P. Moreno		Transaction ID: 30b-21-17607-17607 Date of Disbursement 11 / 07 / 2006	
Mailing Address 498 N. 4th Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jose Lamour		Transaction ID: 30b-21-17608-17608 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3 Summer Place		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Iman Coachman		Transaction ID: 30b-21-17623-17623 Date of Disbursement 11 / 07 / 2006	
Mailing Address 17-39 Lincoln Street Apt. 405		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Brandon Lee Full Name (Last, First, Middle Initial) Mailing Address 17 Stone Street City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17646-17646 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Natasha Burgos Full Name (Last, First, Middle Initial) Mailing Address 10 North Koewin Pl. City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17647-17647 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Jennifer Briones Full Name (Last, First, Middle Initial) Mailing Address 18 Park Dr. Sth 1st Fl City West Orange State NJ Zip Code 07052 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17651-17651 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶

225.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Denise Howell		Transaction ID: 30b-21-17685-17685 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 99 Chapman Place		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marie Howell		Transaction ID: 30b-21-17686-17686 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 99 Chapman Place		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Charlene Howell		Transaction ID: 30b-21-17687-17687 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 99 Chapman Place		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1497 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tremaine Howell		Transaction ID: 30b-21-17689-17689 Date of Disbursement 11 / 07 / 2006	
Mailing Address 99 Chapman Place		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andrea Gibbs		Transaction ID: 30b-21-17693-17693 Date of Disbursement 11 / 07 / 2006	
Mailing Address 317 Park Place		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Willard Gibbs		Transaction ID: 30b-21-17694-17694 Date of Disbursement 11 / 07 / 2006	
Mailing Address 317 Park Place		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Desirea Carr		Transaction ID: 30b-21-17695-17695 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 43 East Park Street Apt 23		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lamar Morrison		Transaction ID: 30b-21-17700-17700 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 29 Western Parkway		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Aliyah Bowen		Transaction ID: 30b-21-17716-17716 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 119 Mapes Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1499 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Quanika Brydie		Transaction ID: 30b-21-17722-17722 Date of Disbursement 11 / 07 / 2006	
Mailing Address 89 Columbia Avenue, Apt. 2B		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Victoria Brydie		Transaction ID: 30b-21-17724-17724 Date of Disbursement 11 / 07 / 2006	
Mailing Address 32 Philip Place		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kamille Bynum		Transaction ID: 30b-21-17726-17726 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1500 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Majorie Cey		Transaction ID: 30b-21-17728-17728 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 108 Paine Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Melinda Cey		Transaction ID: 30b-21-17730-17730 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 109 Paine Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Carol Coleman		Transaction ID: 30b-21-17734-17734 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 24 Homestead Park		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1501 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Shakina Hickson Full Name (Last, First, Middle Initial) Mailing Address 23 Western Parkway City Irvington State NJ Zip Code 07111 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17744-17744 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Sabrina Maximin Full Name (Last, First, Middle Initial) Mailing Address 380 Union Avenue City Irvington State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17754-17754 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Tanajah Lowery Full Name (Last, First, Middle Initial) Mailing Address 353 Leslie Street City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-17756-17756 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tina Lucas		Transaction ID: 30b-21-17757-17757 Date of Disbursement 11 / 07 / 2006	
Mailing Address 319 Coit Street		Amount of Each Disbursement this Period 75.00	
City Irvington	State NJ	Zip Code 07111	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Janelle Lowery		Transaction ID: 30b-21-17762-17762 Date of Disbursement 11 / 07 / 2006	
Mailing Address 353 Leslie Street		Amount of Each Disbursement this Period 75.00	
City Newark	State NJ	Zip Code 07112	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Mary Kennedy		Transaction ID: 30b-21-17764-17764 Date of Disbursement 11 / 07 / 2006	
Mailing Address 396 Wainwright Street		Amount of Each Disbursement this Period 75.00	
City Newark	State NJ	Zip Code 07112	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Ellen Lagao		Transaction ID: 30b-21-17766-17766 Date of Disbursement 11 / 07 / 2006	
Mailing Address 19 Fern Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Bianca Antoine		Transaction ID: 30b-21-17770-17770 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Cynthia Antoine		Transaction ID: 30b-21-17773-17773 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 1504 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Antoine		Transaction ID: 30b-21-17774-17774 Date of Disbursement 11 / 07 / 2006
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 75.00
City Irvington	State NJ Zip Code 07111	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Hakim Beasley		Transaction ID: 30b-21-17790-17790 Date of Disbursement 11 / 07 / 2006
Mailing Address 608 Chancellor Avenue		Amount of Each Disbursement this Period 75.00
City Irvington	State NJ Zip Code 07111	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Tanisha Manning		Transaction ID: 30b-21-17821-17821 Date of Disbursement 11 / 07 / 2006
Mailing Address 139 Mt. Vernon Place		Amount of Each Disbursement this Period 75.00
City Newark	State NJ Zip Code 07106	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Arthur Brayboy		Transaction ID: 30b-21-17831-17831
Mailing Address 351 Chapman Street		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Arthur Brayboy		Transaction ID: 30b-21-17832-17832
Mailing Address 351 Chapman Street		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Janet Soler-Webb		Transaction ID: 30b-21-17836-17836
Mailing Address 593 South 11th Street		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Newark	State NJ	Amount of Each Disbursement this Period 75.00
Zip Code 07103		
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. James Blaney		Transaction ID: 30b-21-17843-17843 Date of Disbursement 11 / 07 / 2006
Mailing Address 173 Dickerson Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. James Blaney		Transaction ID: 30b-21-17844-17844 Date of Disbursement 11 / 07 / 2006
Mailing Address 173 Dickerson Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Dorothea Powell		Transaction ID: 30b-21-17848-17848 Date of Disbursement 11 / 07 / 2006
Mailing Address 125 Weequahic Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Quadira Smith		Transaction ID: 30b-21-17849-17849 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 57 Marth Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Malcolm Hayman		Transaction ID: 30b-21-17934-17934 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 27 Colleen Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Joseph Greer		Transaction ID: 30b-21-17942-17942 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 458-C Bergen Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Khalif Bowles		Transaction ID: 30b-21-17954-17954 Date of Disbursement 11 / 07 / 2006	
Mailing Address 18 South 17 Street 2nd Floor		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jason Smiley		Transaction ID: 30b-21-17955-17955 Date of Disbursement 11 / 07 / 2006	
Mailing Address 138 Elmwood Avenue		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Imani Harper		Transaction ID: 30b-21-17956-17956 Date of Disbursement 11 / 07 / 2006	
Mailing Address 149 Weequahic Avenue		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cory Crawford		Transaction ID: 30b-21-17958-17958 Date of Disbursement 11 / 07 / 2006
Mailing Address 276 Clinton Place		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Devon Horton		Transaction ID: 30b-21-17959-17959 Date of Disbursement 11 / 07 / 2006
Mailing Address 75-95 Clinton Avenue Apt 12F		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Olajawan Hasbin		Transaction ID: 30b-21-17962-17962 Date of Disbursement 11 / 07 / 2006
Mailing Address 18 South 17th Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Karriem Arnold		Transaction ID: 30b-21-17966-17966 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 179-205 Irvine Turner Boulevard Apt		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Dawn Asberry		Transaction ID: 30b-21-17969-17969 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 284 Leslie Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Diane Scott		Transaction ID: 30b-21-17997-17997 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 35 12th Avenue Apt #3503		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Philip Baskerville		Transaction ID: 30b-21-18090-18090 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 33 Netherwood Place		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Tommy Easterling		Transaction ID: 30b-21-18091-18091 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 120 Shanely Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Detra Randle		Transaction ID: 30b-21-18097-18097 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 469 Elizabeth Avenue Apt 402		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alice Randle		Transaction ID: 30b-21-18103-18103 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 65-B Irvine Turner Boulevard		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Thomas Kiernan		Transaction ID: 30b-21-18122-18122 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Madison Ave, Apartment 6		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kashif Jones		Transaction ID: 30b-21-18126-18126 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 58 Hedden Terrace		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Al-Hassan Neblett		Transaction ID: 30b-21-18133-18133 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 231 Park Place		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Taili Brookins		Transaction ID: 30b-21-18137-18137 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 269 Clinton Place		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Darne Williams		Transaction ID: 30b-21-18138-18138 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 269 Clinton Place		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Malik James		Transaction ID: 30b-21-18146-18146 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Schulyer Avenue 3rd Floor		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Wade Borns		Transaction ID: 30b-21-18151-18151 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 37 Shanley Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Martha Abraham		Transaction ID: 30b-21-18161-18161 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 295 Woodside Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Daphne Williams Full Name (Last, First, Middle Initial) Mailing Address 389 North Maple Avenue City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18187-18187 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Tiffany Maldonado Full Name (Last, First, Middle Initial) Mailing Address 57 Chester Avenue City Newark State NJ Zip Code 07104 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18189-18189 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Janice Blakes Full Name (Last, First, Middle Initial) Mailing Address 33 North Sixth Street City Newark State NJ Zip Code 07107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18205-18205 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Deborah Baldwin Full Name (Last, First, Middle Initial) Mailing Address 75 - 95 Clinton Avenue City Newark State NJ Zip Code 07114 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18241-18241 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Jessie James Full Name (Last, First, Middle Initial) Mailing Address 6 Seymore Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18264-18264 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Dawn Asberry Full Name (Last, First, Middle Initial) Mailing Address 284 Leslie Street City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18270-18270 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Tammy Ford Full Name (Last, First, Middle Initial) Mailing Address 50 Seymour Avenue City Newark State NJ Zip Code 07112 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18272-18272 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Elizabeth Powell Full Name (Last, First, Middle Initial) Mailing Address 125 Weequahic Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18273-18273 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Charmaine Smith Full Name (Last, First, Middle Initial) Mailing Address 299 South 9th Street City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18291-18291 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. LaCreashia Boyd		Transaction ID: 30b-21-18298-18298 Date of Disbursement 11 / 07 / 2006
Mailing Address 308 South 10th Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Edwin Morales		Transaction ID: 30b-21-18300-18300 Date of Disbursement 11 / 07 / 2006
Mailing Address 295 Mount Prospect Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jermayne Wheeler		Transaction ID: 30b-21-18301-18301 Date of Disbursement 11 / 07 / 2006
Mailing Address 64 N. Munn Apt 38		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jermayne Wheeler		Transaction ID: 30b-21-18302-18302 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 64 N. Munn Apt 38		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Calvin Smiley		Transaction ID: 30b-21-18303-18303 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 282 South 6th Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Calvin Smiley		Transaction ID: 30b-21-18304-18304 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 282 South 6th Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Hakim Williams</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 80 High Street</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-18310-18310</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Anthony Wiltshire</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 128 Hillyer Street</p> <p>City East Orange State NJ Zip Code 07017</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-18324-18324</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Scotty Ansong</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 131 Washington Street</p> <p>City East Orange State NJ Zip Code 07017</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-18325-18325</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="225.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Amont Augustine		Transaction ID: 30b-21-18329-18329 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 765 Valley Street		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code 07050		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Alisha Philemon		Transaction ID: 30b-21-18330-18330 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3 Watson Avenue		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jasmine Thurmond		Transaction ID: 30b-21-18333-18333 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 573 Morris Street		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code 07050		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Darlene Davis Full Name (Last, First, Middle Initial) Mailing Address 177 James Street Apt 2A City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18337-18337 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Deidre Stafford Full Name (Last, First, Middle Initial) Mailing Address 218 Orange Street Apt 3A City Newark State NJ Zip Code 07103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18340-18340 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Clifford Baxter Full Name (Last, First, Middle Initial) Mailing Address 320 South Orange Avenue City Newark State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18343-18343 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alaji Ali		Transaction ID: 30b-21-18373-18373 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 142 Main Street Apt. 1		Amount of Each Disbursement this Period 75.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jesse Diaz		Transaction ID: 30b-21-18375-18375 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 10 Waldo Avenue #1		Amount of Each Disbursement this Period 75.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. George Carrero		Transaction ID: 30b-21-18376-18376 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 26 Ella Street		Amount of Each Disbursement this Period 75.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Robert DePaul		Transaction ID: 30b-21-18377-18377 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3 Brook End Drive		Amount of Each Disbursement this Period 75.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Melissa Polanco		Transaction ID: 30b-21-18379-18379 Date of Disbursement 11 / 07 / 2006	
Mailing Address 243 Broad Street		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Khalif Ball		Transaction ID: 30b-21-18380-18380 Date of Disbursement 11 / 07 / 2006	
Mailing Address 148 Tuxedo Parkway		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rafael Concepcion, Jr.		Transaction ID: 30b-21-18381-18381 Date of Disbursement 11 / 07 / 2006
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Teri Smith		Transaction ID: 30b-21-18384-18384 Date of Disbursement 11 / 07 / 2006
Mailing Address 130 Shephard Avenue		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sherel Johnson		Transaction ID: 30b-21-18385-18385 Date of Disbursement 11 / 07 / 2006
Mailing Address 276 Amherst Street 1st Floor		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Beatrice Gonzalez		Transaction ID: 30b-21-18388-18388 Date of Disbursement 11 / 07 / 2006
Mailing Address 203 Watchung Avenue Apt 2		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Adam Axelrod		Transaction ID: 30b-21-18390-18390 Date of Disbursement 11 / 07 / 2006
Mailing Address 14 Seaman Road		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Adam Arena		Transaction ID: 30b-21-18392-18392 Date of Disbursement 11 / 07 / 2006
Mailing Address 18 Park Drive South 1st Floor		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Naomi Gonzalez		Transaction ID: 30b-21-18394-18394 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 203 Watchung Avenue		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Louis Antenor		Transaction ID: 30b-21-18415-18415 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 46 Lorelei Road		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Sarah Wesley		Transaction ID: 30b-21-18416-18416 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Valley Way		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Esqueree		Transaction ID: 30b-21-18417-18417 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 181 Mitchell Street		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Max Rivas		Transaction ID: 30b-21-18423-18423 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 54 Hazel Avenue		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Jenna Scheps		Transaction ID: 30b-21-18440-18440 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Valley Way		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Mike Chalet</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 378 Broad Street</p> <p>City Bloomfield State NJ Zip Code 07003</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-18441-18441</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Jenna Scheps</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 9 Valley Way</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-18443-18443</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Ron Botelho</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7 Woodhull Avenue</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-18444-18444</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="225.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Asia Stanislaus		Transaction ID: 30b-21-18448-18448 Date of Disbursement 11 / 07 / 2006
Mailing Address 58 Terrace Avenue		Amount of Each Disbursement this Period 75.00
City West Orange	State NJ Zip Code 07052	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jean Napoleon		Transaction ID: 30b-21-18449-18449 Date of Disbursement 11 / 07 / 2006
Mailing Address 35 Watsseing Avenue		Amount of Each Disbursement this Period 75.00
City Bloomfield	State NJ Zip Code 07003	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Claudeen Benoit		Transaction ID: 30b-21-18454-18454 Date of Disbursement 11 / 07 / 2006
Mailing Address 10 North Kowain Place		Amount of Each Disbursement this Period 75.00
City West Orange	State NJ Zip Code 07052	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Briana Sellers		Transaction ID: 30b-21-18456-18456 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 300 Main Street Apt 11		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Angelica Burton		Transaction ID: 30b-21-18458-18458 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 26 Kling Street		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ryan Tice		Transaction ID: 30b-21-18515-18515 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 151 Prospect Avenue, Apartment 6F		Amount of Each Disbursement this Period 75.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jonathan Mattos		Transaction ID: 30b-21-18526-18526 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 15-17 Halleck Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Yasmin Acevedo		Transaction ID: 30b-21-18527-18527 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 780 Broadway, Apartment BD		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Daphne Williams		Transaction ID: 30b-21-18528-18528 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 389 North Maple Avenue		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jenna Scheps		Transaction ID: 30b-21-18529-18529 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Valley Way		Amount of Each Disbursement this Period 75.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Gregory Richter		Transaction ID: 30b-21-18624-18624 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 Wood Street		Amount of Each Disbursement this Period 75.00
City Burlington State NJ Zip Code 08016		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Tashell Martin		Transaction ID: 30b-21-18630-18630 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 8 Exton Lane		Amount of Each Disbursement this Period 75.00
City Willingboro State NJ Zip Code 08046		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Faith Franklin Full Name (Last, First, Middle Initial) Mailing Address 200 Mullica Hill Road Box 2011 City Glassboro State NJ Zip Code 08028 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18631-18631 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Karen Badie Full Name (Last, First, Middle Initial) Mailing Address 520 Collings Avenue Apartment 403B City Collingswood State NJ Zip Code 08017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18635-18635 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Patricia Bowen Full Name (Last, First, Middle Initial) Mailing Address 13 Brandywine Road City Laurel Springs State NJ Zip Code 08021 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18831-18831 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kaisha Mercado		Transaction ID: 30b-21-18834-18834 Date of Disbursement 11 / 07 / 2006
Mailing Address 812 Tulip Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Shabria Flack		Transaction ID: 30b-21-18836-18836 Date of Disbursement 11 / 07 / 2006
Mailing Address 1443 Crestmont Ave		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tarr Harris		Transaction ID: 30b-21-18839-18839 Date of Disbursement 11 / 07 / 2006
Mailing Address 200 Mullica Hill Road		Amount of Each Disbursement this Period 75.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dru Mealing		Transaction ID: 30b-21-18899-18899 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 485 Cary Street		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Melissa Montan		Transaction ID: 30b-21-18907-18907 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 49 Howell Place		Amount of Each Disbursement this Period 75.00
City Kearny State NJ Zip Code 07032	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Stephon Reeves		Transaction ID: 30b-21-18997-18997 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 145 Dwight Street		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1537 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Eugene Streeter Full Name (Last, First, Middle Initial) Mailing Address 143 Fulton Avenue City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18998-18998 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Tyrell Watford Full Name (Last, First, Middle Initial) Mailing Address 50 Gardner City Jersey City State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-18999-18999 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Maurice Watson Full Name (Last, First, Middle Initial) Mailing Address 1866 JFK Boulevard City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19000-19000 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tiona Hawkins		Transaction ID: 30b-21-19010-19010 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 164 Streetegman Street		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maria Javier		Transaction ID: 30b-21-19015-19015 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 205 Monticello Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ruwhiy Barrow		Transaction ID: 30b-21-19021-19021 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 218 Fulton Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Reina Delacruz		Transaction ID: 30b-21-19025-19025 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 358 Montgomery Street Apt. 5G		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Laura Gamble		Transaction ID: 30b-21-19044-19044 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 340 Thomas Boulevard #6E		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jeanette Nunez		Transaction ID: 30b-21-19053-19053 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 190 VanNostrand Street		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Diggs		Transaction ID: 30b-21-19073-19073 Date of Disbursement 11 / 07 / 2006
Mailing Address 49 Clinton Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Chartryce Mullins		Transaction ID: 30b-21-19077-19077 Date of Disbursement 11 / 07 / 2006
Mailing Address 134 Van Norstrand Avenue 2nd Floor		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Joyce Praylow		Transaction ID: 30b-21-19078-19078 Date of Disbursement 11 / 07 / 2006
Mailing Address 62 Rutgers Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Nyeisha Thompson Full Name (Last, First, Middle Initial) Mailing Address 240 Clerk Street City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19080-19080 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. James Diggs Full Name (Last, First, Middle Initial) Mailing Address 62 Rutgers Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19082-19082 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Yasheida Taylor Full Name (Last, First, Middle Initial) Mailing Address 754 Communipaw Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19178-19178 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jacqueline Burrough		Transaction ID: 30b-21-19181-19181 Date of Disbursement 11 / 07 / 2006	
Mailing Address 7 Centerway Avenue		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07012	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Linda Williams		Transaction ID: 30b-21-19188-19188 Date of Disbursement 11 / 07 / 2006	
Mailing Address 22 Belmont Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jeffrey Felusme		Transaction ID: 30b-21-19192-19192 Date of Disbursement 11 / 07 / 2006	
Mailing Address 70 Wade Street		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dion Hardee		Transaction ID: 30b-21-19209-19209 Date of Disbursement 11 / 07 / 2006	
Mailing Address 218 Duncan Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. R Wali Sloan		Transaction ID: 30b-21-19212-19212 Date of Disbursement 11 / 07 / 2006	
Mailing Address 5 Whitney Place Apt 22		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jacklyn Richardson		Transaction ID: 30b-21-19215-19215 Date of Disbursement 11 / 07 / 2006	
Mailing Address 346 Princeton Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carol Normand		Transaction ID: 30b-21-19221-19221 Date of Disbursement 11 / 07 / 2006	
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gisselle Madariaga		Transaction ID: 30b-21-19223-19223 Date of Disbursement 11 / 07 / 2006	
Mailing Address 305 45TH St.		Amount of Each Disbursement this Period 75.00	
City Union city State NJ Zip Code 07087	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vanessa Garcia		Transaction ID: 30b-21-19230-19230 Date of Disbursement 11 / 07 / 2006	
Mailing Address 328 Duncan Ave		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Raymond Burner		Transaction ID: 30b-21-19239-19239 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 43 Clark Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mohamed Abdelazim		Transaction ID: 30b-21-19240-19240 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 61 Tonnelle Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mina Bekhit		Transaction ID: 30b-21-19241-19241 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2701 Kennedy Boulevard		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Gisselle Madariaga</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 305 45TH St.</p> <p>City Union city State NJ Zip Code 07087</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-19273-19273</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Wanda Mercado</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2019 Bleecker Street</p> <p>City Ridgewood State NY Zip Code 11385</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-19274-19274</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Carmine Migrione</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 165 Reservoir Avenue</p> <p>City Jersey City State NJ Zip Code 07307</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-19370-19370</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="225.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jose Acevedo		Transaction ID: 30b-21-19376-19376 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
Mailing Address 69 Trenton Avenue		Amount of Each Disbursement this Period <input type="text" value="75.00"/>
City Paterson State NJ Zip Code 07513	Purpose of Disbursement Field Consulting Services Candidate Name <input type="text"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Faith Lovely		Transaction ID: 30b-21-19395-19395 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
Mailing Address 563 Montgomery Street		Amount of Each Disbursement this Period <input type="text" value="75.00"/>
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name <input type="text"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Koran Campbell		Transaction ID: 30b-21-19413-19413 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
Mailing Address 80-47 162nd Street		Amount of Each Disbursement this Period <input type="text" value="75.00"/>
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name <input type="text"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adrian Dumit		Transaction ID: 30b-21-19414-19414 Date of Disbursement 11 / 07 / 2006	
Mailing Address 882 Paronia Avenue Apt 302		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jorge Davalos		Transaction ID: 30b-21-19417-19417 Date of Disbursement 11 / 07 / 2006	
Mailing Address 125 Van Wagenen Avenue Apt 302		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07801	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joshua Padilla		Transaction ID: 30b-21-19453-19453 Date of Disbursement 11 / 07 / 2006	
Mailing Address 17 Beacon Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Johanna Recinos		Transaction ID: 30b-21-19454-19454 Date of Disbursement 11 / 07 / 2006
Mailing Address 7 Main Terrace		Amount of Each Disbursement this Period 75.00
City Bloomfield State NJ Zip Code 07003	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Javier Arroyo		Transaction ID: 30b-21-19455-19455 Date of Disbursement 11 / 07 / 2006
Mailing Address 100 Montgomery Street Apartment 15		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07302	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Samantha Hernandez		Transaction ID: 30b-21-19456-19456 Date of Disbursement 11 / 07 / 2006
Mailing Address 319 Fairmount Avenue Apt. 1		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07307	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1550 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cinthya Toledo		Transaction ID: 30b-21-19457-19457 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 111 Lincoln Street		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07307		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Domingo Carattini		Transaction ID: 30b-21-19458-19458 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 445 Ogden Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Erick Camacho		Transaction ID: 30b-21-19477-19477 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Montgomery Street Apt 24C		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1551 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gianina Valdivieso		Transaction ID: 30b-21-19480-19480 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 379 Manila Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Monica Compre		Transaction ID: 30b-21-19481-19481 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 9 Fleet Street		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ada Fuentes		Transaction ID: 30b-21-19485-19485 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 111 Prospect Street, Apartment 1L		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1552 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. David Laboy Full Name (Last, First, Middle Initial) Mailing Address 100 Montgomery Street Apt 11H City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19487-19487 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Peter Rosario Full Name (Last, First, Middle Initial) Mailing Address 17 Gracie Road City East Hanover State NJ Zip Code 07936 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19488-19488 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
--	--	--

C. Joseph Pagan Full Name (Last, First, Middle Initial) Mailing Address 162 Third Street Apt 86 City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19504-19504 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1553 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Brodie		Transaction ID: 30b-21-19505-19505 Date of Disbursement 11 / 07 / 2006	
Mailing Address 36 Highland Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Yazmin Clemente		Transaction ID: 30b-21-19506-19506 Date of Disbursement 11 / 07 / 2006	
Mailing Address 127 Charles Street		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vanessa Normand		Transaction ID: 30b-21-19507-19507 Date of Disbursement 11 / 07 / 2006	
Mailing Address 415 Baldwin Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Reynaldo Ferreira		Transaction ID: 30b-21-19516-19516 Date of Disbursement 11 / 07 / 2006
Mailing Address 19 Montgomery		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Bridget Lopez		Transaction ID: 30b-21-19517-19517 Date of Disbursement 11 / 07 / 2006
Mailing Address 47 St Pauls Avenue Apt 1R		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Jay Padilla		Transaction ID: 30b-21-19518-19518 Date of Disbursement 11 / 07 / 2006
Mailing Address 17 Beacon Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jaime Rodriguez Full Name (Last, First, Middle Initial) Mailing Address 17 Beacon Avenue City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19519-19519 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Louie Figueroa Full Name (Last, First, Middle Initial) Mailing Address 31 Lincoln Street City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19520-19520 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Angel Mendez Full Name (Last, First, Middle Initial) Mailing Address 17 Beacon Avenue City Jersey City State NJ Zip Code 07306 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19523-19523 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rafael Gonzalez		Transaction ID: 30b-21-19527-19527 Date of Disbursement 11 / 07 / 2006
Mailing Address 17 Beacon Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Francis Jorge		Transaction ID: 30b-21-19536-19536 Date of Disbursement 11 / 07 / 2006
Mailing Address 630 Bergen Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gianina Valdivieso		Transaction ID: 30b-21-19539-19539 Date of Disbursement 11 / 07 / 2006
Mailing Address 379 Manila Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jennifer Flores		Transaction ID: 30b-21-19540-19540 Date of Disbursement 11 / 07 / 2006
Mailing Address 27 East 36th Street		Amount of Each Disbursement this Period 75.00
City Bayonne State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Joseph Pagan		Transaction ID: 30b-21-19545-19545 Date of Disbursement 11 / 07 / 2006
Mailing Address 162 Third Street Apt 86		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gilberto Rogalski		Transaction ID: 30b-21-19546-19546 Date of Disbursement 11 / 07 / 2006
Mailing Address 166 Grand Street		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joseph Pagan		Transaction ID: 30b-21-19556-19556 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 162 Third Street Apt 86		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Frank Schmetz		Transaction ID: 30b-21-19559-19559 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 146 Carlton Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Paul Silletti		Transaction ID: 30b-21-19648-19648 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 264 Neptune Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel McMahon		Transaction ID: 30b-21-19659-19659 Date of Disbursement 11 / 07 / 2006
Mailing Address 62 Linden Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Rayen Sipes		Transaction ID: 30b-21-19662-19662 Date of Disbursement 11 / 07 / 2006
Mailing Address 175 West 49th Street		Amount of Each Disbursement this Period 75.00
City Bayonne State NJ Zip Code 07002		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Patrick Desmond		Transaction ID: 30b-21-19666-19666 Date of Disbursement 11 / 07 / 2006
Mailing Address 131 West 4th Street		Amount of Each Disbursement this Period 75.00
City Bayonne State NJ Zip Code 07002		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Harry Aceti		Transaction ID: 30b-21-19680-19680 Date of Disbursement 11 / 07 / 2006	
Mailing Address 8 Highway Road		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William Garretson		Transaction ID: 30b-21-19691-19691 Date of Disbursement 11 / 07 / 2006	
Mailing Address 265 Cator Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sean Matthias		Transaction ID: 30b-21-19703-19703 Date of Disbursement 11 / 07 / 2006	
Mailing Address 4 Skillman Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Margaret Pilla		Transaction ID: 30b-21-19705-19705 Date of Disbursement 11 / 07 / 2006	
Mailing Address 23 Harvard Place		Amount of Each Disbursement this Period 75.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Thomas Lambert		Transaction ID: 30b-21-19706-19706 Date of Disbursement 11 / 07 / 2006	
Mailing Address 11 Jefferson Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jose Lara		Transaction ID: 30b-21-19707-19707 Date of Disbursement 11 / 07 / 2006	
Mailing Address 125 Summit Avenue		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Gloria Stauss Full Name (Last, First, Middle Initial) Mailing Address 58 Cottage Street City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-19789-19789 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Raymond Burner Full Name (Last, First, Middle Initial) Mailing Address 43 Clark Avenue City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20003-20003 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Grace Shokr Full Name (Last, First, Middle Initial) Mailing Address 104 Fairview Avenue City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20004-20004 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Renee Azer Full Name (Last, First, Middle Initial) Mailing Address 528 Kennedy Boulevard 2nd Floor City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20005-20005 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Martha Alicea Full Name (Last, First, Middle Initial) Mailing Address 175 New York Avenue City Jersey City State NJ Zip Code 07307 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20017-20017 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Nicholas Ripp Full Name (Last, First, Middle Initial) Mailing Address 106 Fordham Place City Colonia State NJ Zip Code 07067 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20019-20019 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Crystal Fantauzzi		Transaction ID: 30b-21-20021-20021 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 224 Whiton Street		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07304		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeffrey Felusme		Transaction ID: 30b-21-20035-20035 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 70 Wade Street		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. John Bonomo		Transaction ID: 30b-21-20054-20054 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 10 Oak Street		Amount of Each Disbursement this Period 75.00
City Bayonne State NJ Zip Code 07002		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mohamed Abdelazim		Transaction ID: 30b-21-20059-20059 Date of Disbursement 11 / 07 / 2006
Mailing Address 61 Tonnelle Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Marian Hanna		Transaction ID: 30b-21-20061-20061 Date of Disbursement 11 / 07 / 2006
Mailing Address 59 Tuers Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Anna Marie Meyers		Transaction ID: 30b-21-20063-20063 Date of Disbursement 11 / 07 / 2006
Mailing Address 38 West 7th Street		Amount of Each Disbursement this Period 75.00
City Bayonne State NJ Zip Code 07002	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Radhouane Zaimi Full Name (Last, First, Middle Initial) Mailing Address 517 Avenue A City Bayonne State NJ Zip Code 07002 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20064-20064 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Sharon Godett Full Name (Last, First, Middle Initial) Mailing Address PO Box 322 City Trenton State NJ Zip Code 08603 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20077-20077 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Kevin Hugh Full Name (Last, First, Middle Initial) Mailing Address 9 Stretton Circle City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20079-20079 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mattie Horton		Transaction ID: 30b-21-20082-20082 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 70 North Clinton Avenue Apt 84 A		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Timothy Lanigan		Transaction ID: 30b-21-20083-20083 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 380 Brunswick Ave Apt 2		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Guss Magby		Transaction ID: 30b-21-20084-20084 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 70 North Clinton Avenue Apt 84 A		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shirley Lanigan		Transaction ID: 30b-21-20091-20091 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 380 Brunswick Ave. Apt 2		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Aunyea Alexander		Transaction ID: 30b-21-20093-20093 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 70 N Clinton Avenue Apt A		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Charles Horne		Transaction ID: 30b-21-20097-20097 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 50 Escher Street		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Karissa Figueroa		Transaction ID: 30b-21-20099-20099 Date of Disbursement 11 / 07 / 2006	
Mailing Address 182 Liberty Street		Amount of Each Disbursement this Period 75.00	
City Trenton	State NJ	Zip Code 08611	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) B. Jamie Duhart		Transaction ID: 30b-21-20102-20102 Date of Disbursement 11 / 07 / 2006	
Mailing Address 56 Wayne Drive		Amount of Each Disbursement this Period 75.00	
City Trenton	State NJ	Zip Code 08618	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) C. Brenda Bellamy		Transaction ID: 30b-21-20108-20108 Date of Disbursement 11 / 07 / 2006	
Mailing Address 31 Belleme Avenue		Amount of Each Disbursement this Period 75.00	
City Trenton	State NJ	Zip Code 08119	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Craig Howard		Transaction ID: 30b-21-20110-20110 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 North Clinton Avenue Apt 109		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Medina Wilson		Transaction ID: 30b-21-20115-20115 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2-2 Fairway Drive		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. James Gray		Transaction ID: 30b-21-20116-20116 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 104 Perry Street #6		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Stacy Bryant		Transaction ID: 30b-21-20128-20128 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 800 Fairmount Avenue		Amount of Each Disbursement this Period 75.00	
City Trenton	State NJ	Zip Code 08629	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. David Aroche		Transaction ID: 30b-21-20130-20130 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 10 Wood Apt. 301		Amount of Each Disbursement this Period 75.00	
City Trenton	State NJ	Zip Code 08618	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Bruce Baker		Transaction ID: 30b-21-20131-20131 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 130 Broad Avenue		Amount of Each Disbursement this Period 75.00	
City Trenton	State NJ	Zip Code 08618	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jan Stokes		Transaction ID: 30b-21-20134-20134 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 North Clinton Avenue, Apt 209		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) John Ragsdale		Transaction ID: 30b-21-20149-20149 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 130 Broad Avenue		Amount of Each Disbursement this Period 75.00
City State Zip Code Ewing NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Anthony Marinne		Transaction ID: 30b-21-20151-20151 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 221 East Hanover Street		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gregory Perry		Transaction ID: 30b-21-20153-20153 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 518-520 Martin Luther King Blvd		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gregory Perry		Transaction ID: 30b-21-20183-20183 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 518-520 Martin Luther King Blvd		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mattie Horton		Transaction ID: 30b-21-20188-20188 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 70 North Clinton Avenue Apt 84 A		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Mattie Horton Full Name (Last, First, Middle Initial) Mailing Address 70 North Clinton Avenue Apt 84 A City Trenton State NJ Zip Code 08609 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20189-20189 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Kevin Hugh Full Name (Last, First, Middle Initial) Mailing Address 9 Stretton Circle City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20190-20190 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Joseph Revell Full Name (Last, First, Middle Initial) Mailing Address 77 Prospect Village City Trenton State NJ Zip Code 08618 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20192-20192 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Ishmael Raines		Transaction ID: 30b-21-20193-20193 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 362 Oakland Street		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Ishmael Raines		Transaction ID: 30b-21-20194-20194 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 362 Oakland Street		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Rena Maske		Transaction ID: 30b-21-20195-20195 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 455 Hamilton Avenue, # 5		Amount of Each Disbursement this Period 75.00
City State Zip Code Trenton NJ 08609	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1576 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rena Maske		Transaction ID: 30b-21-20196-20196 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 455 Hamilton Avenue, # 5		Amount of Each Disbursement this Period 75.00	
City Trenton	State NJ	Zip Code 08609	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. Rena Maske		Transaction ID: 30b-21-20197-20197 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 455 Hamilton Avenue, # 5		Amount of Each Disbursement this Period 75.00	
City Trenton	State NJ	Zip Code 08609	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) C. Jessica Fleming		Transaction ID: 30b-21-20242-20242 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2000 Pennington Rd		Amount of Each Disbursement this Period 75.00	
City Ewing	State NJ	Zip Code 08628	Category/ Type
Purpose of Disbursement Field Consulting Services			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Sarah Gutschow Full Name (Last, First, Middle Initial) Mailing Address 56 Titus Avenue City Lawrenceville State NJ Zip Code 08648 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20245-20245 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Keyonna Minor Full Name (Last, First, Middle Initial) Mailing Address 110 City Ave. City Atlantic City State NJ Zip Code 08401 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20251-20251 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Michael Norris Full Name (Last, First, Middle Initial) Mailing Address 67 Groveland Ave. City Ewing State NJ Zip Code 08638 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20253-20253 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dorsa Seima		Transaction ID: 30b-21-20258-20258 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 928 West 6th Street		Amount of Each Disbursement this Period 75.00	
City Plainfield State NJ Zip Code 07060	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anne Deus		Transaction ID: 30b-21-20274-20274 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 21 Oakmont Court		Amount of Each Disbursement this Period 75.00	
City Lincroft State NJ Zip Code 07738	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lynette Barnes		Transaction ID: 30b-21-20275-20275 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 75.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Stephen Smith Full Name (Last, First, Middle Initial) Mailing Address 6903 Monmouth Avenue City Ventnor State NJ Zip Code 08401 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20276-20276 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Steve Lopez Full Name (Last, First, Middle Initial) Mailing Address 42 Emerson Ave. City Paterson State NJ Zip Code 07502 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20280-20280 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Sarah Aziz Full Name (Last, First, Middle Initial) Mailing Address 5507 Plymouth Ave. City Pennsauken State NJ Zip Code 08109 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20286-20286 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1580 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Erin Duffy Full Name (Last, First, Middle Initial) Mailing Address 2000 Pennington Road City Ewing State NJ Zip Code 08628 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20294-20294 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. James Queally Full Name (Last, First, Middle Initial) Mailing Address 389 Barlow Avenue City Staten Island State NY Zip Code 10308 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20297-20297 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Kevin Force Full Name (Last, First, Middle Initial) Mailing Address 285 James Street City Teaneck State NJ Zip Code 07666 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20299-20299 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1581 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Destiny Alexander		Transaction ID: 30b-21-20323-20323 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 75.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jason Smith		Transaction ID: 30b-21-20324-20324 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 267 Lynwood Avenue		Amount of Each Disbursement this Period 75.00	
City Hamilton State NJ Zip Code 08609	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Isaac Mireku		Transaction ID: 30b-21-20325-20325 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 75.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Terry Oppong		Transaction ID: 30b-21-20332-20332 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1211 Robert Street Floor 1		Amount of Each Disbursement this Period 75.00
City Union State Zip Code NJ 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Laura Pita		Transaction ID: 30b-21-20333-20333 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 428 Winthrop Rd.		Amount of Each Disbursement this Period 75.00
City Union State Zip Code NJ 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gabriella Martinez		Transaction ID: 30b-21-20334-20334 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 18 Old Colony Lane		Amount of Each Disbursement this Period 75.00
City Mariton State Zip Code NJ 08053	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1583 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Kellie Montgomery Full Name (Last, First, Middle Initial) Mailing Address 1 Kathryn St. City Lynbrook State NJ Zip Code 11563 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20385-20385 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Samuel Cicero Full Name (Last, First, Middle Initial) Mailing Address 1604 Routh 34 North City Neptune City State NJ Zip Code 07753 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20392-20392 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Manuel Cuello Full Name (Last, First, Middle Initial) Mailing Address 411 Denow Rd. City Pennington State NJ Zip Code 08534 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-20398-20398 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1584 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Katherine Campbell		Transaction ID: 30b-21-20421-20421 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2055 Lawrenceville Road		Amount of Each Disbursement this Period 75.00
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ashley Bergman		Transaction ID: 30b-21-20459-20459 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 180 Fletcher Dr.		Amount of Each Disbursement this Period 75.00
City Yardley State PA Zip Code 19067	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Christina Crapanzano		Transaction ID: 30b-21-20468-20468 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 75 Tar Lee Place		Amount of Each Disbursement this Period 75.00
City Staten Island State NY Zip Code 10308	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Paul Hillier		Transaction ID: 30b-21-20488-20488 Date of Disbursement 11 / 07 / 2006
Mailing Address 17 Gerard Avenue		Amount of Each Disbursement this Period 75.00
City Old Bridge	State NJ Zip Code 08857	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Krystal Wilkie		Transaction ID: 30b-21-20526-20526 Date of Disbursement 11 / 07 / 2006
Mailing Address 7 Hemlock Lane		Amount of Each Disbursement this Period 75.00
City Bayville	State NJ Zip Code 08721	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Tashesia Wilson		Transaction ID: 30b-21-20539-20539 Date of Disbursement 11 / 07 / 2006
Mailing Address 1205 Heck Avenue		Amount of Each Disbursement this Period 75.00
City Neptune	State NJ Zip Code 07753	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Karla Zeno		Transaction ID: 30b-21-20540-20540 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 2000 Pennington Road		Amount of Each Disbursement this Period 75.00	
City Ewing State NJ Zip Code 08628	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Arthur Galarza		Transaction ID: 30b-21-20843-20843 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 460 Andover Place		Amount of Each Disbursement this Period 75.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Li Wang		Transaction ID: 30b-21-20859-20859 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 36 Christian Drive		Amount of Each Disbursement this Period 75.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christian Estevez		Transaction ID: 30b-21-21023-21023 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1352 Murray Avenue		Amount of Each Disbursement this Period 75.00
City Plainfield State NJ Zip Code 07060		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jamila Ford		Transaction ID: 30b-21-21050-21050 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1 A - B May Street		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sheshang Patel		Transaction ID: 30b-21-21053-21053 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 37103 RPO Wy		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Joe Golino		Transaction ID: 30b-21-21172-21172 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 84 Carteret Avenue		Amount of Each Disbursement this Period 75.00
City Carteret State NJ Zip Code 07008	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Joe Golino		Transaction ID: 30b-21-21182-21182 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 84 Carteret Avenue		Amount of Each Disbursement this Period 75.00
City Carteret State NJ Zip Code 07008	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Mengyi Luo		Transaction ID: 30b-21-21317-21317 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 37 Hazel Avenue		Amount of Each Disbursement this Period 75.00
City Livingston State NJ Zip Code 07039	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Yogesh Patel		Transaction ID: 30b-21-21320-21320 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 1019 Adams Avenue		Amount of Each Disbursement this Period 75.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jimmy Quach		Transaction ID: 30b-21-21321-21321 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 1726 Dekalb Avenue		Amount of Each Disbursement this Period 75.00	
City Brooklyn State NY Zip Code 11237	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Renee Raghoo		Transaction ID: 30b-21-21322-21322 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 435 79th Street		Amount of Each Disbursement this Period 75.00	
City North Bergen State NJ Zip Code 07047	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Michael Yang Full Name (Last, First, Middle Initial) Mailing Address 822 East Henry Street City Linden State NJ Zip Code 07036 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-21323-21323 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Kimone Williams Full Name (Last, First, Middle Initial) Mailing Address 290 George Street Apartment 909 City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-21325-21325 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Vernee Brooks Full Name (Last, First, Middle Initial) Mailing Address 100 Roosevelt Avenue Apartment T2 City Carteret State NJ Zip Code 07008 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-21334-21334 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Allison Bosso		Transaction ID: 30b-21-21342-21342 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 32 Campbell Avenue		Amount of Each Disbursement this Period 75.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Priya Chadha		Transaction ID: 30b-21-21343-21343 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 51 Kelly Way		Amount of Each Disbursement this Period 75.00	
City Monmouth Jun State NJ Zip Code 08852	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicole Fabretti		Transaction ID: 30b-21-21354-21354 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 223 Central Avenue		Amount of Each Disbursement this Period 75.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Richard Lorenzo		Transaction ID: 30b-21-21367-21367 Date of Disbursement 11 / 07 / 2006
Mailing Address 33 Hannah Drive		Amount of Each Disbursement this Period 75.00
City Dayton State NJ Zip Code 08810	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Thomas Mendez		Transaction ID: 30b-21-21370-21370 Date of Disbursement 11 / 07 / 2006
Mailing Address 1 Springdale Rd.		Amount of Each Disbursement this Period 75.00
City Kendall Park State NJ Zip Code 08824	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sreenesh Raja		Transaction ID: 30b-21-21384-21384 Date of Disbursement 11 / 07 / 2006
Mailing Address 26 Wexford Drive		Amount of Each Disbursement this Period 75.00
City Monmouth Junction State NJ Zip Code 08852	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel Winters		Transaction ID: 30b-21-21400-21400 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 79 Harmon Road		Amount of Each Disbursement this Period 75.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jerome Baker		Transaction ID: 30b-21-21517-21517 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 316 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. John Ball		Transaction ID: 30b-21-21518-21518 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 68 Park Avenue Apt. 405		Amount of Each Disbursement this Period 75.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michelle Ball		Transaction ID: 30b-21-21519-21519 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 68 Park Avenue Apartment 405		Amount of Each Disbursement this Period 75.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Susan Ball		Transaction ID: 30b-21-21521-21521 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 68 Park Avenue Apartment 405		Amount of Each Disbursement this Period 75.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kristen Corno		Transaction ID: 30b-21-21523-21523 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 41 Brookville Road.		Amount of Each Disbursement this Period 75.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Deyra Diril		Transaction ID: 30b-21-21525-21525 Date of Disbursement 11 / 07 / 2006	
Mailing Address 5 Dana Circle		Amount of Each Disbursement this Period 75.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Justin Dooley		Transaction ID: 30b-21-21526-21526 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3 Greenbriar Lane		Amount of Each Disbursement this Period 75.00	
City Perrineville State NJ Zip Code 08535	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Amanda Franken		Transaction ID: 30b-21-21528-21528 Date of Disbursement 11 / 07 / 2006	
Mailing Address 33 Siltes Road		Amount of Each Disbursement this Period 75.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Violet Gayle		Transaction ID: 30b-21-21529-21529 Date of Disbursement 11 / 07 / 2006	
Mailing Address 13 Longview Dr.		Amount of Each Disbursement this Period 75.00	
City Bridgeton State NJ Zip Code 08302	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Shante Gillian		Transaction ID: 30b-21-21530-21530 Date of Disbursement 11 / 07 / 2006	
Mailing Address 70 West Sterns Street		Amount of Each Disbursement this Period 75.00	
City Rahway State NJ Zip Code 07065	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Erik Gupp		Transaction ID: 30b-21-21532-21532 Date of Disbursement 11 / 07 / 2006	
Mailing Address 42940 Brookridge Court		Amount of Each Disbursement this Period 75.00	
City Leesburg State VA Zip Code 20176	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kathleen Kilijansiu		Transaction ID: 30b-21-21536-21536 Date of Disbursement 11 / 07 / 2006	
Mailing Address 27 Dey Place		Amount of Each Disbursement this Period 75.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jessica Lopez		Transaction ID: 30b-21-21538-21538 Date of Disbursement 11 / 07 / 2006	
Mailing Address 30766 RPO Way		Amount of Each Disbursement this Period 75.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Crystal Molyneaux		Transaction ID: 30b-21-21540-21540 Date of Disbursement 11 / 07 / 2006	
Mailing Address 31221 RPO Way		Amount of Each Disbursement this Period 75.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kelvin Pena		Transaction ID: 30b-21-21544-21544 Date of Disbursement 11 / 07 / 2006	
Mailing Address 357 Halladay Street		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. John Prignano		Transaction ID: 30b-21-21545-21545 Date of Disbursement 11 / 07 / 2006	
Mailing Address 118 Huntington Street		Amount of Each Disbursement this Period 75.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Christian Rocha		Transaction ID: 30b-21-21546-21546 Date of Disbursement 11 / 07 / 2006	
Mailing Address 36 Quentin Avenue		Amount of Each Disbursement this Period 75.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sarab Thapar		Transaction ID: 30b-21-21552-21552 Date of Disbursement 11 / 07 / 2006	
Mailing Address 63 Rosemont Terrace		Amount of Each Disbursement this Period 75.00	
City West Orange	State NJ	Zip Code 07052	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Yasaswi Vishnubhotla		Transaction ID: 30b-21-21555-21555 Date of Disbursement 11 / 07 / 2006	
Mailing Address 145 Taylor Avenue Apartment B		Amount of Each Disbursement this Period 75.00	
City East Brunswick	State NJ	Zip Code 08816	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Timmion Banton		Transaction ID: 30b-21-21564-21564 Date of Disbursement 11 / 07 / 2006	
Mailing Address 386 Hale Street		Amount of Each Disbursement this Period 75.00	
City New Brunswick	State NJ	Zip Code 08901	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tammy Ratliff		Transaction ID: 30b-21-21568-21568 Date of Disbursement 11 / 07 / 2006	
Mailing Address P.O. Box 5483		Amount of Each Disbursement this Period 75.00	
City New Brunswick	State NJ	Zip Code 08903	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) B. Willie Boswell		Transaction ID: 30b-21-21578-21578 Date of Disbursement 11 / 07 / 2006	
Mailing Address 8106 Timberline Court		Amount of Each Disbursement this Period 75.00	
City South Brunswick	State NJ	Zip Code 08852	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) C. Rufina Perez		Transaction ID: 30b-21-21590-21590 Date of Disbursement 11 / 07 / 2006	
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 75.00	
City New Brunswick	State NJ	Zip Code 08901	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Antoinette Sanchez		Transaction ID: 30b-21-21591-21591 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 32 Langley Place		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jose Trinidad		Transaction ID: 30b-21-21594-21594 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 621 20th Avenue		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07504		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gilberta Menes		Transaction ID: 30b-21-21604-21604 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 22 Louis Street		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Davion Gomez		Transaction ID: 30b-21-21697-21697 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 107 Vaughan Drive		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Daniel Gutierrez		Transaction ID: 30b-21-21699-21699 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 6018 Jefferson Street		Amount of Each Disbursement this Period 75.00
City West New York State NJ Zip Code 07093		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kenneth Woods		Transaction ID: 30b-21-21733-21733 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 173 Throop Avenue		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code 08901		
Purpose of Disbursement Field Consulting Services	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Edward Korejko		Transaction ID: 30b-21-21742-21742 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 21080 BPO Way		Amount of Each Disbursement this Period 75.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Jorron Jenkins		Transaction ID: 30b-21-21856-21856 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 51 Railroad Avenue		Amount of Each Disbursement this Period 75.00
City Roebing State NJ Zip Code 08856	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Lotanna Onuekwusi		Transaction ID: 30b-21-21869-21869 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 369 Park Avenue Apt. E 18		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Egan		Transaction ID: 30b-21-21909-21909 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 18 Handy Street		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Michael Robinson		Transaction ID: 30b-21-21942-21942 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20-22 Abeel Street		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Maurice Johnson		Transaction ID: 30b-21-21974-21974 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1669 Norris Street		Amount of Each Disbursement this Period 75.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jonathan Collado		Transaction ID: 30b-21-22054-22054 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 677 Wood Avenue		Amount of Each Disbursement this Period 75.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Joseph Cem		Transaction ID: 30b-21-22073-22073 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 8 New York Boulevard		Amount of Each Disbursement this Period 75.00
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mara Villanueva		Transaction ID: 30b-21-22106-22106 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 14 Crossgate Road		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1606 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Vladislav Ungurgan		Transaction ID: 30b-21-22108-22108 Date of Disbursement 11 / 07 / 2006
Mailing Address 4 Cherry Mews		Amount of Each Disbursement this Period 75.00
City River Edge	State NJ Zip Code 07661	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Monkonjai Bryant		Transaction ID: 30b-21-22157-22157 Date of Disbursement 11 / 07 / 2006
Mailing Address 420 Roebling Avenue		Amount of Each Disbursement this Period 75.00
City Trenton	State NJ Zip Code 08611	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Brandon Lee		Transaction ID: 30b-21-22428-22428 Date of Disbursement 11 / 07 / 2006
Mailing Address 23 Surrey Lane		Amount of Each Disbursement this Period 75.00
City East Brunswick	State NJ Zip Code 08816	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Quadir Ames		Transaction ID: 30b-21-22452-22452 Date of Disbursement 11 / 07 / 2006	
Mailing Address 184 Lawrence Place		Amount of Each Disbursement this Period 75.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Alejandro Delavega		Transaction ID: 30b-21-22472-22472 Date of Disbursement 11 / 07 / 2006	
Mailing Address 68 Oak Street.		Amount of Each Disbursement this Period 75.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. David Hughes		Transaction ID: 30b-21-22487-22487 Date of Disbursement 11 / 07 / 2006	
Mailing Address 184 Lawrence Place		Amount of Each Disbursement this Period 75.00	
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Shamekia McFadden Full Name (Last, First, Middle Initial) Mailing Address 144 Godwin Avenue City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22507-22507 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Renzo Flores Full Name (Last, First, Middle Initial) Mailing Address 119 Madison Street City Paterson State NJ Zip Code 07501 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22528-22528 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Erica Richards Full Name (Last, First, Middle Initial) Mailing Address 23-8 Alois Place City Paterson State NJ Zip Code 07514 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22529-22529 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michente Stradford		Transaction ID: 30b-21-22540-22540 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 670 East 23rd Street		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Latoya D Williams		Transaction ID: 30b-21-22555-22555 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 184 Lawrence Place		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ebony Williams		Transaction ID: 30b-21-22556-22556 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 184 Lawrence Street		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Latoya D Williams		Transaction ID: 30b-21-22558-22558 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 184 Lawrence Place		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sonya Williams		Transaction ID: 30b-21-22559-22559 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 300 Hamilton Avenue		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07501	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Bianca Arambulo		Transaction ID: 30b-21-22572-22572 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 150 Harrison Street #2		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Chanelle Arambulo		Transaction ID: 30b-21-22578-22578 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 150 Harrison Street #2		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rosa Carrillo		Transaction ID: 30b-21-22581-22581 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 90 Clifton Avenue Apartment 2		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ana Carvajal		Transaction ID: 30b-21-22582-22582 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 26 Grace Avenue		Amount of Each Disbursement this Period 75.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Cespedes		Transaction ID: 30b-21-22584-22584 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 250 Harrison Street #2B		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Emmanuel Cabrera		Transaction ID: 30b-21-22592-22592 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 117 8th Street		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Edward Capellan		Transaction ID: 30b-21-22593-22593 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 7-9 3rd Street #12		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jhon Cardona		Transaction ID: 30b-21-22595-22595 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 437 Howe Avenue		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Pedro Gonzalez		Transaction ID: 30b-21-22602-22602 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 123 Passaic Street #3		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Michelle Hernandez		Transaction ID: 30b-21-22615-22615 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 12 Martha Place		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Richie Gonzalez Full Name (Last, First, Middle Initial) Mailing Address 106 Lexington Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22618-22618 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Roberto Rosario Full Name (Last, First, Middle Initial) Mailing Address 177 Eight Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22626-22626 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Luis Goris Full Name (Last, First, Middle Initial) Mailing Address 177 8th Street City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22627-22627 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Frank Lantigua		Transaction ID: 30b-21-22628-22628 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7-9 3rd Street, Apartment 4		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Johnny Martinez		Transaction ID: 30b-21-22633-22633 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 204 President Street #220		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Sabrina Martinez		Transaction ID: 30b-21-22634-22634 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 18 Federal Street		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Felix Nunez		Transaction ID: 30b-21-22636-22636 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 60 Jackson Street		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Vickiana Polanco		Transaction ID: 30b-21-22644-22644 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 227 Monroe Street		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lilianny Ramos		Transaction ID: 30b-21-22648-22648 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 61 Irving Place		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Deivis Reyes		Transaction ID: 30b-21-22651-22651 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 147 Summer Street		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Carlos Rodriguez		Transaction ID: 30b-21-22656-22656 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 100 Passaic Street Apt 4G		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. MIGUEL RODRIGUEZ		Transaction ID: 30b-21-22657-22657 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 66 Getty Avenue		Amount of Each Disbursement this Period 75.00
City Clifton State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tiffany Rutherford		Transaction ID: 30b-21-22663-22663 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 297 Chestnut Street		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Joel Rufino		Transaction ID: 30b-21-22664-22664 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 4th Street		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Lina Serna		Transaction ID: 30b-21-22665-22665 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 23 Passaic Avenue #D9		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. CARLYS SEVERINO		Transaction ID: 30b-21-22666-22666
Mailing Address 23 Passaic Avenue #D9		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Passaic	State NJ	Zip Code 07055
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 75.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Domingo Tejada		Transaction ID: 30b-21-22670-22670
Mailing Address 106 Passaic Street, Apartment 2		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Passaic	State NJ	Zip Code 07055
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 75.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Francisco Vallejo		Transaction ID: 30b-21-22674-22674
Mailing Address 162 Gregory Ave, #9		Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
City Passaic	State NJ	Zip Code 07055
Purpose of Disbursement Field Consulting Services	Amount of Each Disbursement this Period 75.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joel Vargas Full Name (Last, First, Middle Initial) Mailing Address 39 Hammond Avenue #1 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22675-22675 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Andy Vasquez Full Name (Last, First, Middle Initial) Mailing Address 106 Howe Avenue #24 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22676-22676 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Dahiana Vasquez Full Name (Last, First, Middle Initial) Mailing Address 53 Burgess Place City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22677-22677 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Joel Toribio Full Name (Last, First, Middle Initial) Mailing Address 194 8th Street Apartment 1 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22678-22678 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Juliany Toribio Full Name (Last, First, Middle Initial) Mailing Address 194 8th Street Apartment 1 City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22679-22679 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Alexander Urban Full Name (Last, First, Middle Initial) Mailing Address 324 Pennington Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22680-22680 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alex Valenzuela		Transaction ID: 30b-21-22682-22682 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 109 Kenington Terrace		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Luis Vasquez		Transaction ID: 30b-21-22683-22683 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7-9 3rd Street #5		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nelsy Vasquez		Transaction ID: 30b-21-22684-22684 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7-9 3rd Street, Apt. 5		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jason Urban		Transaction ID: 30b-21-22686-22686 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Madeline Colon		Transaction ID: 30b-21-22691-22691 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Carlos Vasquez		Transaction ID: 30b-21-22692-22692 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 96 Hammond Avenue		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aladino Urban		Transaction ID: 30b-21-22693-22693 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 324 Pennington Avenue		Amount of Each Disbursement this Period 75.00
City Passaic State NJ Zip Code 07055	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jonathan Rivera		Transaction ID: 30b-21-22704-22704 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 34 Brown Avenue		Amount of Each Disbursement this Period 75.00
City Prospect Park State NJ Zip Code 07508	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Fatema Abuhamdah		Transaction ID: 30b-21-22727-22727 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 142 Caldwell Avenue		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07510	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Fatema Abuhamdah		Transaction ID: 30b-21-22728-22728 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 142 Caldwell Avenue		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07510	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Austin Ayers		Transaction ID: 30b-21-22732-22732 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 889 Edwards Road		Amount of Each Disbursement this Period 75.00
City Parsippany State NJ Zip Code 07054	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Austin Ayers		Transaction ID: 30b-21-22733-22733 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 889 Edwards Road		Amount of Each Disbursement this Period 75.00
City Parsippany State NJ Zip Code 07054	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. John Bishop		Transaction ID: 30b-21-22738-22738 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 Broadway 4-G		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07501	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. John Bishop		Transaction ID: 30b-21-22739-22739 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 400 Broadway 4-G		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07501	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Robert Calamito		Transaction ID: 30b-21-22742-22742 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 11 Hickory Road		Amount of Each Disbursement this Period 75.00
City Pequannock State NJ Zip Code 07440	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Gerson Cano Full Name (Last, First, Middle Initial) Mailing Address 408 Rutherford Avenue City Lyndhurst State NJ Zip Code 07071 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22746-22746 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Elena Cesario Full Name (Last, First, Middle Initial) Mailing Address 443 B Marshall Street City Paterson State NJ Zip Code 07503 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22747-22747 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Elena Cesario Full Name (Last, First, Middle Initial) Mailing Address 443 B Marshall Street City Paterson State NJ Zip Code 07503 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22748-22748 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Karolina Dobosz		Transaction ID: 30b-21-22754-22754 Date of Disbursement 11 / 07 / 2006
Mailing Address 20 East Russell Street		Amount of Each Disbursement this Period 75.00
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Chris Fernandez		Transaction ID: 30b-21-22759-22759 Date of Disbursement 11 / 07 / 2006
Mailing Address 259 East Pierrepont		Amount of Each Disbursement this Period 75.00
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Chris Fernandez		Transaction ID: 30b-21-22760-22760 Date of Disbursement 11 / 07 / 2006
Mailing Address 259 East Pierrepont		Amount of Each Disbursement this Period 75.00
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nick Fernandez		Transaction ID: 30b-21-22761-22761 Date of Disbursement 11 / 07 / 2006	
Mailing Address 260 East Pierrepont		Amount of Each Disbursement this Period 75.00	
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nick Fernandez		Transaction ID: 30b-21-22762-22762 Date of Disbursement 11 / 07 / 2006	
Mailing Address 260 East Pierrepont		Amount of Each Disbursement this Period 75.00	
City Rutherford State NJ Zip Code 07070	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Steven Freeman		Transaction ID: 30b-21-22763-22763 Date of Disbursement 11 / 07 / 2006	
Mailing Address 7 North Pine Lane		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jesse Garcia Full Name (Last, First, Middle Initial) Mailing Address 143 East Ninth Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22764-22764 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Vesna Goreska Full Name (Last, First, Middle Initial) Mailing Address 273 Harding Avenue City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22766-22766 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Nikolce Goreski Full Name (Last, First, Middle Initial) Mailing Address 273 Harding Avenue City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22767-22767 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Barry Green		Transaction ID: 30b-21-22768-22768 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 730 Elizabeth Avenue		Amount of Each Disbursement this Period 75.00
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Tommy Heredia		Transaction ID: 30b-21-22770-22770 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 77 1/2 Montclair Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tommy Heredia		Transaction ID: 30b-21-22771-22771 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 77 1/2 Montclair Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Zoran Goreski		Transaction ID: 30b-21-22772-22772 Date of Disbursement 11 / 07 / 2006	
Mailing Address 14 Lincoln Avenue		Amount of Each Disbursement this Period 75.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joan Ianetti		Transaction ID: 30b-21-22774-22774 Date of Disbursement 11 / 07 / 2006	
Mailing Address 21H Colonia Drive		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07424	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joan Ianetti		Transaction ID: 30b-21-22775-22775 Date of Disbursement 11 / 07 / 2006	
Mailing Address 21H Colonia Drive		Amount of Each Disbursement this Period 75.00	
City Jersey City State NJ Zip Code 07424	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Janice Latorre Full Name (Last, First, Middle Initial) Mailing Address 24 East Ninth Street City Clifton State NJ Zip Code 07011 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22777-22777 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Angel Manzueta Full Name (Last, First, Middle Initial) Mailing Address 67 8th Avenue City Passaic State NJ Zip Code 07055 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22779-22779 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Micah Moise Full Name (Last, First, Middle Initial) Mailing Address 599 14th Avenue City Paterson State NJ Zip Code 07504 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-22781-22781 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jorge Morel		Transaction ID: 30b-21-22783-22783 Date of Disbursement 11 / 07 / 2006	
Mailing Address 128 East 8th Street		Amount of Each Disbursement this Period 75.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. David Odum		Transaction ID: 30b-21-22784-22784 Date of Disbursement 11 / 07 / 2006	
Mailing Address 300 Pompton Rd		Amount of Each Disbursement this Period 75.00	
City Wayne State NJ Zip Code 07470	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Ortiz Jr		Transaction ID: 30b-21-22785-22785 Date of Disbursement 11 / 07 / 2006	
Mailing Address 452 Ridge Road		Amount of Each Disbursement this Period 75.00	
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Romina Pascual		Transaction ID: 30b-21-22788-22788 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 94 Market Street		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07505	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kathryn Rich		Transaction ID: 30b-21-22791-22791 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 30 Eyeter Street		Amount of Each Disbursement this Period 75.00
City Morris Plains State NJ Zip Code 07950	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kathryn Rich		Transaction ID: 30b-21-22792-22792 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 30 Eyeter Street		Amount of Each Disbursement this Period 75.00
City Morris Plains State NJ Zip Code 07950	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Kathryn Rich		Transaction ID: 30b-21-22793-22793 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 30 Eyeter Street		Amount of Each Disbursement this Period 75.00
City Morris Plains State NJ Zip Code 07950	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) George Rodriguez		Transaction ID: 30b-21-22794-22794 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 111 Rowland Avenue		Amount of Each Disbursement this Period 75.00
City Clifton State NJ Zip Code 07012	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Tommy Stensgard		Transaction ID: 30b-21-22798-22798 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 509 3rd Avenue		Amount of Each Disbursement this Period 75.00
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tommy Stensgard		Transaction ID: 30b-21-22799-22799 Date of Disbursement 11 / 07 / 2006
Mailing Address 509 3rd Avenue		Amount of Each Disbursement this Period 75.00
City Lyndhurst	State NJ Zip Code 07071	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Shaun Tamayo		Transaction ID: 30b-21-22801-22801 Date of Disbursement 11 / 07 / 2006
Mailing Address 188 Highland Cross		Amount of Each Disbursement this Period 75.00
City Rutherford	State NJ Zip Code 07070	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Shaun Tamayo		Transaction ID: 30b-21-22802-22802 Date of Disbursement 11 / 07 / 2006
Mailing Address 188 Highland Cross		Amount of Each Disbursement this Period 75.00
City Rutherford	State NJ Zip Code 07070	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Barbara Walensky		Transaction ID: 30b-21-22804-22804 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 76 DeWitt Street		Amount of Each Disbursement this Period 75.00
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Barbara Walensky		Transaction ID: 30b-21-22805-22805 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 76 DeWitt Street		Amount of Each Disbursement this Period 75.00
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Veronica Yacco		Transaction ID: 30b-21-22808-22808 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 12 Hillside Road		Amount of Each Disbursement this Period 75.00
City Kinnelon State NJ Zip Code 07405	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Veronica Yacco		Transaction ID: 30b-21-22809-22809 Date of Disbursement 11 / 07 / 2006	
Mailing Address 12 Hillside Road		Amount of Each Disbursement this Period 75.00	
City Kinnelon State NJ Zip Code 07405	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Sharan Zarate		Transaction ID: 30b-21-22811-22811 Date of Disbursement 11 / 07 / 2006	
Mailing Address 10 Garretsee Avenue		Amount of Each Disbursement this Period 75.00	
City Clifton State NJ Zip Code 07011	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Barry Green		Transaction ID: 30b-21-22828-22828 Date of Disbursement 11 / 07 / 2006	
Mailing Address 730 Elizabeth Avenue		Amount of Each Disbursement this Period 75.00	
City Lyndhurst State NJ Zip Code 07071	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Ortiz Jr		Transaction ID: 30b-21-22830-22830 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 452 Ridge Road		Amount of Each Disbursement this Period 75.00
City Lyndhurst	State NJ Zip Code 07071	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Hayin Candiotti		Transaction ID: 30b-21-22931-22931 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 42 East 22nd Avenue		Amount of Each Disbursement this Period 75.00
City Paterson	State NJ Zip Code 07513	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Luz Carrera		Transaction ID: 30b-21-22935-22935 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 88 3rd Avenue		Amount of Each Disbursement this Period 75.00
City Paterson	State NJ Zip Code 07514	
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hortencia Chang		Transaction ID: 30b-21-22936-22936 Date of Disbursement 11 / 07 / 2006
Mailing Address 46 22nd Avenue		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07513	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rafaela Despradel		Transaction ID: 30b-21-22937-22937 Date of Disbursement 11 / 07 / 2006
Mailing Address 88 3rd Avenue 1st Floor		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gloria Donarye		Transaction ID: 30b-21-22940-22940 Date of Disbursement 11 / 07 / 2006
Mailing Address 460 Paxton Street		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07522	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nina Roman		Transaction ID: 30b-21-22987-22987 Date of Disbursement 11 / 07 / 2006	
Mailing Address 82 Maitland Place		Amount of Each Disbursement this Period 75.00	
City Garfield	State NJ	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Austria Cuevas		Transaction ID: 30b-21-23133-23133 Date of Disbursement 11 / 07 / 2006	
Mailing Address 507 Brace Avenue		Amount of Each Disbursement this Period 75.00	
City Perth Amboy	State NJ	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Maria DeLeon		Transaction ID: 30b-21-23144-23144 Date of Disbursement 11 / 07 / 2006	
Mailing Address 450 Division Street		Amount of Each Disbursement this Period 75.00	
City Perth Amboy	State NJ	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Genina Jimenez		Transaction ID: 30b-21-23149-23149 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 618 Hanson Avenue		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Eduardo Ayala		Transaction ID: 30b-21-23156-23156 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 23 Dino Drive		Amount of Each Disbursement this Period 75.00
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jesus Castillo		Transaction ID: 30b-21-23174-23174 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 61 Kendall Drive		Amount of Each Disbursement this Period 75.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juan C. Solis Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-23204-23204 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Felix Enrique Talavera Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-23207-23207 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 508 Hidden Village Drive		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. William Moyano Full Name (Last, First, Middle Initial)		Transaction ID: 30b-21-23218-23218 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 94 Kendall Dr		Amount of Each Disbursement this Period 75.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marbey Barcenas		Transaction ID: 30b-21-23234-23234 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07514	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jose Abreu		Transaction ID: 30b-21-23235-23235 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 450 Division, 2nd Floor		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Edwin Ayala		Transaction ID: 30b-21-23238-23238 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 5 Dino Drive		Amount of Each Disbursement this Period 75.00
City Keasbey State NJ Zip Code 08832	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jose Batista		Transaction ID: 30b-21-23239-23239 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 650 Katherine Avenue		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08865		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Susana Hernandez		Transaction ID: 30b-21-23240-23240 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 115 Brighton Avenue Apartment 4		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Andrea Lavallo		Transaction ID: 30b-21-23241-23241 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 115 Brighton Avenue Apt. 4		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Miguel Lavalle		Transaction ID: 30b-21-23242-23242 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 115 Brighton Avenue, Apt. 4		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nataly Lavalle		Transaction ID: 30b-21-23243-23243 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 115 Brighton Ave., Apt. 4		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Julio DeLeon		Transaction ID: 30b-21-23249-23249 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 450 Division Street		Amount of Each Disbursement this Period 75.00
City Perth Amboy State NJ Zip Code 08861	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Juan C. Solis Full Name (Last, First, Middle Initial) Mailing Address 508 Hidden Village Drive City Perth Amboy State NJ Zip Code 08861 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23256-23256 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Samantha Ramirez Full Name (Last, First, Middle Initial) Mailing Address 89 Truman Drive City Edison State NJ Zip Code 08817 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23261-23261 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Sean P Faughnan Full Name (Last, First, Middle Initial) Mailing Address 145 Stiles Street Apt 12C City Elizabeth State NJ Zip Code 07208 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23549-23549 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sean P Faughnan		Transaction ID: 30b-21-23550-23550 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 145 Stiles Street Apt 12C		Amount of Each Disbursement this Period 75.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sean P Faughnan		Transaction ID: 30b-21-23551-23551 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 145 Stiles Street Apt 12C		Amount of Each Disbursement this Period 75.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Abubakar Jalloh		Transaction ID: 30b-21-23552-23552 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 75.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Abubakar Jalloh		Transaction ID: 30b-21-23553-23553 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 75.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Abubakar Jalloh		Transaction ID: 30b-21-23554-23554 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 75.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Abubakar Jalloh		Transaction ID: 30b-21-23555-23555 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 75.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ann Lord		Transaction ID: 30b-21-23558-23558 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2296 Allen Street		Amount of Each Disbursement this Period 75.00
City Rahway State NJ Zip Code		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Elizabeth Genievich		Transaction ID: 30b-21-23561-23561 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 408 Inwood Road		Amount of Each Disbursement this Period 75.00
City Linden State NJ Zip Code 07036		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sebastian DELia		Transaction ID: 30b-21-23562-23562 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 36 Shady Lane		Amount of Each Disbursement this Period 75.00
City Fanwood State NJ Zip Code 07023		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marlena Rosso		Transaction ID: 30b-21-23564-23564 Date of Disbursement 11 / 07 / 2006	
Mailing Address 408 Erico Avenue		Amount of Each Disbursement this Period 75.00	
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Marlena Rosso		Transaction ID: 30b-21-23566-23566 Date of Disbursement 11 / 07 / 2006	
Mailing Address 408 Erico Avenue		Amount of Each Disbursement this Period 75.00	
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Sean P Faughnan		Transaction ID: 30b-21-23568-23568 Date of Disbursement 11 / 07 / 2006	
Mailing Address 145 Stiles Street Apt 12C		Amount of Each Disbursement this Period 75.00	
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Julian Buitnaga		Transaction ID: 30b-21-23570-23570 Date of Disbursement 11 / 07 / 2006	
Mailing Address 366 Forest Avenue		Amount of Each Disbursement this Period 75.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Julian Buitnaga		Transaction ID: 30b-21-23571-23571 Date of Disbursement 11 / 07 / 2006	
Mailing Address 366 Forest Avenue		Amount of Each Disbursement this Period 75.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Murray		Transaction ID: 30b-21-23575-23575 Date of Disbursement 11 / 07 / 2006	
Mailing Address 529 Edgar Road		Amount of Each Disbursement this Period 75.00	
City Westfield State NJ Zip Code 07090	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1654 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Murray		Transaction ID: 30b-21-23577-23577 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 529 Edgar Road		Amount of Each Disbursement this Period 75.00
City Westfield State NJ Zip Code 07090	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Elizabeth Genievich		Transaction ID: 30b-21-23578-23578 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 408 Inwood Road		Amount of Each Disbursement this Period 75.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jennifer Erdos		Transaction ID: 30b-21-23579-23579 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 33 Myrtle Street		Amount of Each Disbursement this Period 75.00
City Cranford State NJ Zip Code 07016	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jennifer Erdos Full Name (Last, First, Middle Initial) Mailing Address 33 Myrtle Street City Cranford State NJ Zip Code 07016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23580-23580 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Sean Devaney Full Name (Last, First, Middle Initial) Mailing Address 213 Donald Avenue City Rahway State NJ Zip Code 07065 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23583-23583 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Sean Devaney Full Name (Last, First, Middle Initial) Mailing Address 213 Donald Avenue City Rahway State NJ Zip Code 07065 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23584-23584 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Sean Devaney Full Name (Last, First, Middle Initial) Mailing Address 213 Donald Avenue City Rahway State NJ Zip Code 07065 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23585-23585 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. James McCrady Full Name (Last, First, Middle Initial) Mailing Address 26 East Colfax Avenue City Roselle Park State NJ Zip Code 07204 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23586-23586 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. James McCrady Full Name (Last, First, Middle Initial) Mailing Address 26 East Colfax Avenue City Roselle Park State NJ Zip Code 07204 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23587-23587 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. James McCrady		Transaction ID: 30b-21-23588-23588 Date of Disbursement 11 / 07 / 2006	
Mailing Address 26 East Colfax Avenue		Amount of Each Disbursement this Period 75.00	
City Roselle Park State NJ Zip Code 07204	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Salena Carroll		Transaction ID: 30b-21-23589-23589 Date of Disbursement 11 / 07 / 2006	
Mailing Address 612 Ziegler Avenue Apt 8		Amount of Each Disbursement this Period 75.00	
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Nicholas H Fixmer		Transaction ID: 30b-21-23592-23592 Date of Disbursement 11 / 07 / 2006	
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 75.00	
City Scotch Plains State NJ Zip Code 07076	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicholas H Fixmer		Transaction ID: 30b-21-23593-23593 Date of Disbursement 11 / 07 / 2006	
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 75.00	
City Scotch Plains	State NJ	Zip Code 07076	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) B. Nicholas H Fixmer		Transaction ID: 30b-21-23594-23594 Date of Disbursement 11 / 07 / 2006	
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 75.00	
City Scotch Plains	State NJ	Zip Code 07076	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) C. Desiree Rico		Transaction ID: 30b-21-23595-23595 Date of Disbursement 11 / 07 / 2006	
Mailing Address 253 Lehigh Avenue		Amount of Each Disbursement this Period 75.00	
City Roselle Park	State NJ	Zip Code 07204	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Desiree Rico		Transaction ID: 30b-21-23596-23596 Date of Disbursement 11 / 07 / 2006	
Mailing Address 253 Lehigh Avenue		Amount of Each Disbursement this Period 75.00	
City Roselle Park State NJ Zip Code 07204	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Barry Geller		Transaction ID: 30b-21-23599-23599 Date of Disbursement 11 / 07 / 2006	
Mailing Address 103 Schwin Drive		Amount of Each Disbursement this Period 75.00	
City Clark State NJ Zip Code 07066	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicole Dirado		Transaction ID: 30b-21-23600-23600 Date of Disbursement 11 / 07 / 2006	
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 75.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicole Dirado		Transaction ID: 30b-21-23601-23601 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 75.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nicole Dirado		Transaction ID: 30b-21-23602-23602 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 75.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicole Dirado		Transaction ID: 30b-21-23603-23603 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 733 Greenwood Road		Amount of Each Disbursement this Period 75.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Brennan		Transaction ID: 30b-21-23605-23605 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2268 Jersey Avenue		Amount of Each Disbursement this Period 75.00
City State Zip Code Scotch Plains NJ 07076	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Brennan		Transaction ID: 30b-21-23606-23606 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2268 Jersey Avenue		Amount of Each Disbursement this Period 75.00
City State Zip Code Scotch Plains NJ 07076	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Salena Carroll		Transaction ID: 30b-21-23608-23608 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 612 Ziegler Avenue Apt 8		Amount of Each Disbursement this Period 75.00
City State Zip Code Linden NJ 07036	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ann Lord		Transaction ID: 30b-21-23609-23609 Date of Disbursement 11 / 07 / 2006	
Mailing Address 2296 Allen Street		Amount of Each Disbursement this Period 75.00	
City Rahway State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mary Lynn Williams		Transaction ID: 30b-21-23610-23610 Date of Disbursement 11 / 07 / 2006	
Mailing Address 744 East 2nd Street		Amount of Each Disbursement this Period 75.00	
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mary Lynn Williams		Transaction ID: 30b-21-23611-23611 Date of Disbursement 11 / 07 / 2006	
Mailing Address 744 East 2nd Street		Amount of Each Disbursement this Period 75.00	
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jennifer Erdos Full Name (Last, First, Middle Initial) Mailing Address 33 Myrtle Street City Cranford State NJ Zip Code 07016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23614-23614 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Charlene Davis Full Name (Last, First, Middle Initial) Mailing Address 156 Park Place City Elizabeth State NJ Zip Code 07206 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23671-23671 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Taylia Davis Full Name (Last, First, Middle Initial) Mailing Address 148A Front Street City Elizabeth State NJ Zip Code 07206 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-23675-23675 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jacqueline Davis		Transaction ID: 30b-21-23694-23694 Date of Disbursement 11 / 07 / 2006	
Mailing Address 148A Front Street		Amount of Each Disbursement this Period 75.00	
City Elizabeth State NJ Zip Code 07206	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sebastian DElia		Transaction ID: 30b-21-23731-23731 Date of Disbursement 11 / 07 / 2006	
Mailing Address 36 Shady Lane		Amount of Each Disbursement this Period 75.00	
City Fanwood State NJ Zip Code 07023	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Barry Geller		Transaction ID: 30b-21-23734-23734 Date of Disbursement 11 / 07 / 2006	
Mailing Address 103 Schwin Drive		Amount of Each Disbursement this Period 75.00	
City Clark State NJ Zip Code 07066	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Trevor Polk		Transaction ID: 30b-21-23740-23740 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 30 Gylnn Court		Amount of Each Disbursement this Period 75.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lorraine Daliessio		Transaction ID: 30b-21-23817-23817 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 843 North Lawrence Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lorraine Daliessio		Transaction ID: 30b-21-23819-23819 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 843 North Lawrence Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shakirah Campbell		Transaction ID: 30b-21-23908-23908 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 66 Kenwood Place		Amount of Each Disbursement this Period 75.00
City East Orange	State NJ	
Zip Code 07018		
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Clinton Robinson		Transaction ID: 30b-21-23909-23909 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 4 Hudson Avenue		Amount of Each Disbursement this Period 75.00
City East Orange	State NJ	
Zip Code 07018		
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Clinton Robinson		Transaction ID: 30b-21-23917-23917 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 4 Hudson Avenue		Amount of Each Disbursement this Period 75.00
City East Orange	State NJ	
Zip Code 07018		
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Richard Aubjoni		Transaction ID: 30b-21-23919-23919 Date of Disbursement 11 / 07 / 2006
Mailing Address 192 Central Avenue		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Glenn Arnold		Transaction ID: 30b-21-23930-23930 Date of Disbursement 11 / 07 / 2006
Mailing Address 165 Clairmont Terrace		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07050		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lionel Leach		Transaction ID: 30b-21-23935-23935 Date of Disbursement 11 / 07 / 2006
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Heather Clark		Transaction ID: 30b-21-23954-23954 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1801 North Howard Street #2		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19122	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jessica Piraneo		Transaction ID: 30b-21-23958-23958 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2139 Manton Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19146	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jessica Piraneo		Transaction ID: 30b-21-23959-23959 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2139 Manton Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19146	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Gibson		Transaction ID: 30b-21-23960-23960 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2429 South 12th Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19148	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Matthew Gibson		Transaction ID: 30b-21-23961-23961 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2429 South 12th Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19148	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Roberto Segan		Transaction ID: 30b-21-23962-23962 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 526 Wilder Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Roberto Segan		Transaction ID: 30b-21-23963-23963 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 526 Wilder Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Roberto Segan		Transaction ID: 30b-21-23964-23964 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 526 Wilder Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Roberto Segan		Transaction ID: 30b-21-23965-23965 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 526 Wilder Street		Amount of Each Disbursement this Period 75.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Katrina Frisby		Transaction ID: 30b-21-24010-24010 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 73 B W. Broadway St.		Amount of Each Disbursement this Period 75.00	
City Salem State NJ Zip Code 08079	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bekkah Parsons		Transaction ID: 30b-21-24011-24011 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 217 North Elm St		Amount of Each Disbursement this Period 75.00	
City Salem State NJ Zip Code 08079	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Riley		Transaction ID: 30b-21-24017-24017 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 88 E. Barber Ave.		Amount of Each Disbursement this Period 75.00	
City Woodbury State NJ Zip Code 08096	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sharla Canion		Transaction ID: 30b-21-24046-24046 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 5636 West Buck Street		Amount of Each Disbursement this Period 75.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sharla Canion		Transaction ID: 30b-21-24053-24053 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 5636 West Buck Street		Amount of Each Disbursement this Period 75.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Timothy Luster		Transaction ID: 30b-21-24054-24054 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 830 East Elmer Street		Amount of Each Disbursement this Period 75.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Sherman Hampton		Transaction ID: 30b-21-24059-24059 Date of Disbursement 11 / 07 / 2006
Mailing Address 22 Elm St.		Amount of Each Disbursement this Period 75.00
City Salem State NJ Zip Code 08079	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lisa Luster		Transaction ID: 30b-21-24061-24061 Date of Disbursement 11 / 07 / 2006
Mailing Address 566 Yale Avenue		Amount of Each Disbursement this Period 75.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kevin Adams		Transaction ID: 30b-21-24063-24063 Date of Disbursement 11 / 07 / 2006
Mailing Address 301 North Wade Boulevard Apt 308		Amount of Each Disbursement this Period 75.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jasmine Harris		Transaction ID: 30b-21-24133-24133 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 626 20th Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Al-Rashied Turner		Transaction ID: 30b-21-24136-24136 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 147 James Street Apt 2A		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Rahmaan Shahid		Transaction ID: 30b-21-24139-24139 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Marshall Street		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Talya Sinclair		Transaction ID: 30b-21-24140-24140 Date of Disbursement 11 / 07 / 2006	
Mailing Address 208 Lyons Avenue		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Khazyah Perry		Transaction ID: 30b-21-24147-24147 Date of Disbursement 11 / 07 / 2006	
Mailing Address 79 Grace Street		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Quaniyan Smith		Transaction ID: 30b-21-24151-24151 Date of Disbursement 11 / 07 / 2006	
Mailing Address 79 Norwood Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Boone-Speakman		Transaction ID: 30b-21-24156-24156 Date of Disbursement 11 / 07 / 2006
Mailing Address 19 Hazel Place		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Wanda Goode		Transaction ID: 30b-21-24161-24161 Date of Disbursement 11 / 07 / 2006
Mailing Address 659 Chancellor Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Cassandra Piercin		Transaction ID: 30b-21-24162-24162 Date of Disbursement 11 / 07 / 2006
Mailing Address 35 Orange Place		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Reynold Suvil		Transaction ID: 30b-21-24170-24170 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 75.00	
City Irvington	State NJ	Zip Code 07111	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tamara Suvil		Transaction ID: 30b-21-24171-24171 Date of Disbursement 11 / 07 / 2006	
Mailing Address 20 Park Place		Amount of Each Disbursement this Period 75.00	
City Irvington	State NJ	Zip Code 07111	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Arlene Gibbs		Transaction ID: 30b-21-24172-24172 Date of Disbursement 11 / 07 / 2006	
Mailing Address 311 Park Place		Amount of Each Disbursement this Period 75.00	
City Irvington	State NJ	Zip Code 07111	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Emma Guice Full Name (Last, First, Middle Initial) Mailing Address 1 Hazel Place City Irvington State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-24176-24176 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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B. Soleil Brown Full Name (Last, First, Middle Initial) Mailing Address 81 Madison Avenue City Irvington State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-24177-24177 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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C. Sherina Florant Full Name (Last, First, Middle Initial) Mailing Address 306 Isabella Avenue City Irvington State NJ Zip Code Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-24178-24178 Date of Disbursement 11 / 07 / 2006 Amount of Each Disbursement this Period 75.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alexis Swanson		Transaction ID: 30b-21-24201-24201 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3001 South Grove Street		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kendra Taliaferro		Transaction ID: 30b-21-24212-24212 Date of Disbursement 11 / 07 / 2006	
Mailing Address 59 Westcott Street		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ashley Swanson		Transaction ID: 30b-21-24218-24218 Date of Disbursement 11 / 07 / 2006	
Mailing Address 3001 South Grove Street		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07018	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nancy Kidd		Transaction ID: 30b-21-24220-24220 Date of Disbursement 11 / 07 / 2006	
Mailing Address 154 Park Street		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Taniquah Holman		Transaction ID: 30b-21-24223-24223 Date of Disbursement 11 / 07 / 2006	
Mailing Address 615 North Grove Street		Amount of Each Disbursement this Period 75.00	
City East Orange State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tamel Saunders		Transaction ID: 30b-21-24226-24226 Date of Disbursement 11 / 07 / 2006	
Mailing Address 15 Isabelle Avenue 2nd Floor		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07016	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joshua Baker		Transaction ID: 30b-21-24252-24252 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 27 Beech Street		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Denise Lyon		Transaction ID: 30b-21-24253-24253 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 255 South Harrison Street Apt 6		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lonnie Hughes		Transaction ID: 30b-21-24278-24278 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 189 North Munn Avenue		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kenneth Hargraves		Transaction ID: 30b-21-24292-24292 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 57 Clifton Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07114	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Theresa Scott		Transaction ID: 30b-21-24296-24296 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 138 Mt. Veron Place		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Quadree Manning		Transaction ID: 30b-21-24299-24299 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 138 Mt. Vernon Place		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Diane Scott		Transaction ID: 30b-21-24300-24300 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 35 12th Avenue Apt #3503		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Willie Bogan		Transaction ID: 30b-21-24305-24305 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 602 Martin Luther King Boulevard		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Bruce Simpson		Transaction ID: 30b-21-24306-24306 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 72 Wolcott Terrace		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bruce Simpson		Transaction ID: 30b-21-24307-24307 Date of Disbursement 11 / 07 / 2006	
Mailing Address 72 Wolcott Terrace		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code 07112	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24308-24308 Date of Disbursement 11 / 07 / 2006	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicole Neal		Transaction ID: 30b-21-24314-24314 Date of Disbursement 11 / 07 / 2006	
Mailing Address 12 Marsac Place		Amount of Each Disbursement this Period 75.00	
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicole Neal		Transaction ID: 30b-21-24315-24315 Date of Disbursement 11 / 07 / 2006
Mailing Address 12 Marsac Place		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24323-24323 Date of Disbursement 11 / 07 / 2006
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michelle Franklin		Transaction ID: 30b-21-24352-24352 Date of Disbursement 11 / 07 / 2006
Mailing Address 243 North Oraton Parkway		Amount of Each Disbursement this Period 65.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	215.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Delores Johnson		Transaction ID: 30b-21-24361-24361 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 31 Richelieu Place		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Delores Johnson		Transaction ID: 30b-21-24363-24363 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 31 Richelieu Place		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Minnie Allen		Transaction ID: 30b-21-24364-24364 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 82 Vaughn Drive		Amount of Each Disbursement this Period 65.00
City Newark State NJ Zip Code 07108	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Larissa Folk		Transaction ID: 30b-21-24415-24415 Date of Disbursement 11 / 07 / 2006	
Mailing Address PO Box 1067		Amount of Each Disbursement this Period 60.00	
City Maplewood	State NJ	Zip Code 07040	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) B. Catherine Willis		Transaction ID: 30b-21-24419-24419 Date of Disbursement 11 / 07 / 2006	
Mailing Address 120 Washington Street, Apt 14		Amount of Each Disbursement this Period 60.00	
City East Orange	State NJ	Zip Code 07017	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) C. Catherine Willis		Transaction ID: 30b-21-24420-24420 Date of Disbursement 11 / 07 / 2006	
Mailing Address 120 Washington Street, Apt 14		Amount of Each Disbursement this Period 60.00	
City East Orange	State NJ	Zip Code 07017	Category/ Type
Purpose of Disbursement Field Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Catherine Willis		Transaction ID: 30b-21-24421-24421 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 120 Washington Street, Apt 14		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Catherine Willis		Transaction ID: 30b-21-24422-24422 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 120 Washington Street, Apt 14		Amount of Each Disbursement this Period 60.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jason Mitchell		Transaction ID: 30b-21-24452-24452 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 102 Holly Street		Amount of Each Disbursement this Period 100.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) John Bohner		Transaction ID: 30b-21-24483-24483 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address		Amount of Each Disbursement this Period 100.00
City	State Zip Code	
Purpose of Disbursement Field Consulting Services Candidate Name		Category/ Type
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Tiana Tucker		Transaction ID: 30b-21-24488-24488 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 30 Hana Road		Amount of Each Disbursement this Period 100.00
City	State Zip Code	
Edison NJ 08817 Purpose of Disbursement Field Consulting Services Candidate Name		Category/ Type
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Karina Robredo		Transaction ID: 30b-21-24492-24492 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 20 Cleveland Avenue		Amount of Each Disbursement this Period 100.00
City	State Zip Code	
Harrison NJ 07029 Purpose of Disbursement Field Consulting Services Candidate Name		Category/ Type
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lauren Russell Park		Transaction ID: 30b-21-24494-24494 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 323D Crowells Road		Amount of Each Disbursement this Period 100.00
City Highland Park	State NJ	
Zip Code 08904	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Justin Alsbrook		Transaction ID: 30b-21-24495-24495 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 7 Third Avenue		Amount of Each Disbursement this Period 100.00
City Piscataway	State NJ	
Zip Code 08854	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Harold Kirkpatrick		Transaction ID: 30b-21-24565-24565 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 340 Thomas Boulevard		Amount of Each Disbursement this Period 75.00
City Orange	State NJ	
Zip Code 07050	Category/ Type	
Purpose of Disbursement Field Consulting Services Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Philip Grayer		Transaction ID: 30b-21-24566-24566 Date of Disbursement 11 / 07 / 2006
Mailing Address 85 South Essex Avenue #302		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Warren Williams		Transaction ID: 30b-21-24588-24588 Date of Disbursement 11 / 07 / 2006
Mailing Address 414 Heywood Avenue		Amount of Each Disbursement this Period 75.00
City Orange State NJ Zip Code		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cornelius Cohen		Transaction ID: 30b-21-24597-24597 Date of Disbursement 11 / 07 / 2006
Mailing Address 31 Hedden Terrace		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Jasmine Thurmond</p>		<p>Transaction ID: 30b-21-24607-24607 Date of Disbursement</p>	
<p>Mailing Address 573 Morris Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Orange</p>	<p>State NJ</p>	<p>Zip Code 07050</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="75.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Pat Farrell</p>		<p>Transaction ID: 30b-21-24658-24658 Date of Disbursement</p>	
<p>Mailing Address 81 Sherman Avenue</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Jersey City</p>	<p>State NJ</p>	<p>Zip Code 07306</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="75.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Louis Costanza</p>		<p>Transaction ID: 30b-21-24659-24659 Date of Disbursement</p>	
<p>Mailing Address 115 Paterson Street</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p>	
<p>City Jersey City</p>	<p>State NJ</p>	<p>Zip Code 07306</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Field Consulting Services</p>		<p><input type="text" value=""/></p>	<p><input type="text" value="75.00"/></p>
<p>Candidate Name</p>		<p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="225.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicholas Lopez		Transaction ID: 30b-21-24660-24660 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 709 Summit Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kyle Terry		Transaction ID: 30b-21-24674-24674 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 246 Fulton Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jessica Flores		Transaction ID: 30b-21-24687-24687 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 148 Highland Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maurice Wayne		Transaction ID: 30b-21-24688-24688 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 49 Gardner Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Catherine Willis		Transaction ID: 30b-21-24731-24731 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 120 Washington Street, Apt 14		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Catherine Willis		Transaction ID: 30b-21-24732-24732 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 120 Washington Street, Apt 14		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michelle Franklin		Transaction ID: 30b-21-24733-24733 Date of Disbursement 11 / 07 / 2006
Mailing Address 243 North Oraton Parkway		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Michelle Franklin		Transaction ID: 30b-21-24734-24734 Date of Disbursement 11 / 07 / 2006
Mailing Address 243 North Oraton Parkway		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Michelle Franklin		Transaction ID: 30b-21-24735-24735 Date of Disbursement 11 / 07 / 2006
Mailing Address 243 North Oraton Parkway		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michelle Franklin		Transaction ID: 30b-21-24736-24736 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 243 North Oraton Parkway		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24737-24737 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Lionel Leach		Transaction ID: 30b-21-24738-24738 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lionel Leach		Transaction ID: 30b-21-24739-24739 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24740-24740 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lionel Leach		Transaction ID: 30b-21-24741-24741 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lionel Leach		Transaction ID: 30b-21-24742-24742 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24743-24743 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lionel Leach		Transaction ID: 30b-21-24744-24744 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lionel Leach		Transaction ID: 30b-21-24745-24745 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24746-24746 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lionel Leach		Transaction ID: 30b-21-24747-24747 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
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PAGE 1700 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Lionel Leach		Transaction ID: 30b-21-24748-24748 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Lionel Leach		Transaction ID: 30b-21-24749-24749 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Lionel Leach		Transaction ID: 30b-21-24750-24750 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lionel Leach		Transaction ID: 30b-21-24751-24751 Date of Disbursement 11 / 07 / 2006	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24752-24752 Date of Disbursement 11 / 07 / 2006	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lionel Leach		Transaction ID: 30b-21-24753-24753 Date of Disbursement 11 / 07 / 2006	
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00	
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lionel Leach		Transaction ID: 30b-21-24754-24754 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24755-24755 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Michael Rollins		Transaction ID: 30b-21-24768-24768 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 86 Madonna Place		Amount of Each Disbursement this Period 75.00
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Lionel Leach		Transaction ID: 30b-21-24783-24783 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Lionel Leach		Transaction ID: 30b-21-24784-24784 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 202 Maple Avenue		Amount of Each Disbursement this Period 75.00
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Rafferty Gourmet		Transaction ID: 30b-22-00142-00160 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 106 Albany Street		Amount of Each Disbursement this Period 877.35
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1027.35
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Hilton East Brunswick		Transaction ID: 30b-22-00143-00161 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6
Mailing Address 3 Tower Center Boulevard		Amount of Each Disbursement this Period 5070.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Room Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Gloria Crawley		Transaction ID: 30b-22-00144-0000 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6
Mailing Address 249 Park Avenue		Amount of Each Disbursement this Period 2000.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement See Memo Items Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Kentucky Fried Chicken		Transaction ID: 30b-22-00144-00162 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6
Mailing Address 249 Park Avenue		Amount of Each Disbursement this Period 2000.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Food & Beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	7070.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cooper's Liquors & Deli		Transaction ID: 30b-22-00145-00163
Mailing Address 594 Orange Street		Date of Disbursement MM / DD / YYYY 11 / 09 / 2006
City Newark	State NJ	Zip Code 07107
Purpose of Disbursement Food & Beverage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 1625.00	

Full Name (Last, First, Middle Initial) B. Malik James		Transaction ID: 30b-21-04504-04504
Mailing Address 20 Schulyer Avenue 3rd Floor		Date of Disbursement MM / DD / YYYY 11 / 09 / 2006
City Newark	State NJ	Zip Code 07112
Purpose of Disbursement Field Consulting Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 75.00	

Full Name (Last, First, Middle Initial) C. Iris Daniels		Transaction ID: 30b-21-04512-04512
Mailing Address 801 Noth 6th Street		Date of Disbursement MM / DD / YYYY 11 / 09 / 2006
City Newark	State NJ	Zip Code 07107
Purpose of Disbursement Field Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 75.00	

SUBTOTAL of Disbursements This Page (optional)	▶	1775.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kashif Jones		Transaction ID: 30b-21-04513-04513 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6
Mailing Address 58 Hedden Terrace		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Milton Duran		Transaction ID: 30b-21-04519-04519 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6
Mailing Address 676 Highland Avenue		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. John Patino		Transaction ID: 30b-21-04520-04520 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6
Mailing Address 641 North 9th Street		Amount of Each Disbursement this Period 75.00
City Newark State NJ Zip Code 07107	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jersey Unlimited Moving & Storage		Transaction ID: 30b-22-00146-00164 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 34 Kennedy Boulevard		Amount of Each Disbursement this Period 4382.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Office Services - Moving Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ace Trash Removal		Transaction ID: 30b-22-00147-00165 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 7 Avenue East		Amount of Each Disbursement this Period 1300.00
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Office Services - Facilities Maintenance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Matrix/AEW NB, LLC		Transaction ID: 30b-22-00148-00166 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address CN 4000 Forsgate Drive		Amount of Each Disbursement this Period 2840.84
City Cranbury State NJ Zip Code 08512	Purpose of Disbursement Rent Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	8522.84
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ana Agueda		Transaction ID: 30b-21-04523-04523 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 149-42-6526		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08103	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Angelique Thompson		Transaction ID: 30b-21-04542-04542 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 10 Dunhill Court		Amount of Each Disbursement this Period 225.00
City Voorhees State NJ Zip Code 08043	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Angel Alamo		Transaction ID: 30b-21-04543-04543 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 891 North 27th Street		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	705.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Marilu Burgos		Transaction ID: 30b-21-04544-04544 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1312 B Fairview Street		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Crystal Cruz		Transaction ID: 30b-21-04545-04545 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 227 South 33rd Street		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lorenzo Espinal		Transaction ID: 30b-21-04546-04546 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 759 Woodland Ave		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Benancio Espinal Full Name (Last, First, Middle Initial) Mailing Address 3013 Mickle Street City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04547-04547 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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B. Jouseph Estremera Full Name (Last, First, Middle Initial) Mailing Address 1126 South 3rd Street City Camden State NJ Zip Code 08103 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04548-04548 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Steven Estremera Full Name (Last, First, Middle Initial) Mailing Address 540 Collings Avenue Apt A516 City Collingwood State NJ Zip Code 08107 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04549-04549 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ruben Luna		Transaction ID: 30b-21-04550-04550 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 9 Baranch Village		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Karen Maldonado		Transaction ID: 30b-21-04551-04551 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 19 Terrace Avenue		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Armindo Martinez		Transaction ID: 30b-21-04552-04552 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 945 North 34th Street		Amount of Each Disbursement this Period 240.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	720.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Ramon Martinez</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 945 North 34th Street</p> <p>City Camden State NJ Zip Code 08105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-04553-04553</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Reynaldo Martinez</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 953 North 34th Street</p> <p>City Camden State NJ Zip Code 08105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-04554-04554</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Eric Medina</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 19 Terrace Avenue</p> <p>City Camden State NJ Zip Code 08105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-04555-04555</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.00"/></p>
<p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Category/Type</p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="720.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Maritza Ortiz Full Name (Last, First, Middle Initial) Mailing Address 212 North 32nd Street City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04556-04556 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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B. Carmen Otero Full Name (Last, First, Middle Initial) Mailing Address 945 North 34th Street City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04557-04557 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 480.00 Category/Type
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C. Linette Ramos-Williams Full Name (Last, First, Middle Initial) Mailing Address 42 North 28th Street City Camden State NJ Zip Code 08105 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04558-04558 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	960.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Linette Rivera		Transaction ID: 30b-21-04559-04559 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 1140 North 32nd Street		Amount of Each Disbursement this Period 240.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Luis Rivera		Transaction ID: 30b-21-04560-04560 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 1140 North 32nd Street		Amount of Each Disbursement this Period 240.00	
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Derrick Boone		Transaction ID: 30b-21-04572-04572 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 75 Lafayette Avenue		Amount of Each Disbursement this Period 160.00	
City Englewood State NJ Zip Code 07631	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	640.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. James Boone Full Name (Last, First, Middle Initial) Mailing Address 66 Shepard Avenue City Englewood State NJ Zip Code 07631 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04573-04573 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 160.00 Category/Type
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B. Michael Edward Full Name (Last, First, Middle Initial) Mailing Address 2040 Kennedy Boulevard City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04576-04576 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 240.00 Category/Type
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C. Emilio Cesario Full Name (Last, First, Middle Initial) Mailing Address 20 Agnes Street City Belleville State NJ Zip Code 07109 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04577-04577 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 280.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ► **680.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mario Cesario		Transaction ID: 30b-21-04581-04581 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 20 Agnes Street		Amount of Each Disbursement this Period 280.00
City Belleville State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Constantina Meis		Transaction ID: 30b-21-04582-04582 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 93 Hickory Avenue		Amount of Each Disbursement this Period 280.00
City Bergenfield State NJ Zip Code 07621	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Yolanda Garton		Transaction ID: 30b-21-04590-04590 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 317 South 8th Street		Amount of Each Disbursement this Period 390.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Neftali Guzman Full Name (Last, First, Middle Initial) Mailing Address 9 S. State St City Vineland State NJ Zip Code 08360 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04591-04591 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 190.00
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B. Blanca Iturralde Full Name (Last, First, Middle Initial) Mailing Address 749 South 7th Street City Vineland State NJ Zip Code 08360 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04592-04592 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 390.00
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C. Jonathan Mejia Full Name (Last, First, Middle Initial) Mailing Address 1027 Floren City Vineland State NJ Zip Code 08360 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04593-04593 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 390.00
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SUBTOTAL of Disbursements This Page (optional) ▶	970.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jennifer Mercado		Transaction ID: 30b-21-04594-04594 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 749 Sout 7th Street		Amount of Each Disbursement this Period 340.00
City Vineland State NJ Zip Code 08360		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kimberly Mercado		Transaction ID: 30b-21-04595-04595 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 749 South 7th Street		Amount of Each Disbursement this Period 340.00
City Vineland State NJ Zip Code 08360		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ricardo Mercado		Transaction ID: 30b-21-04596-04596 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 749 South 7th Street		Amount of Each Disbursement this Period 390.00
City Vineland State NJ Zip Code 08360		
Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1070.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jorge Rodriguez		Transaction ID: 30b-21-04598-04598 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 749 South 7th Street		Amount of Each Disbursement this Period 390.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Chad Stuart		Transaction ID: 30b-21-04599-04599 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1006 West Park		Amount of Each Disbursement this Period 250.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Emanuel Velez		Transaction ID: 30b-21-04600-04600 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1528 North Valley		Amount of Each Disbursement this Period 390.00
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1030.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Noah Lindell		Transaction ID: 30b-21-04601-04601 Date of Disbursement 11 / 10 / 2006	
Mailing Address 20 Carteret Street		Amount of Each Disbursement this Period 50.00	
City Montclair State NJ Zip Code 07043	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Henry De Koninck		Transaction ID: 30b-21-04602-04602 Date of Disbursement 11 / 10 / 2006	
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 625.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Roger D. Fox		Transaction ID: 30b-21-04603-04603 Date of Disbursement 11 / 10 / 2006	
Mailing Address 86 Elm Street		Amount of Each Disbursement this Period 50.00	
City Montclair State NJ Zip Code 07042	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	725.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Donald Kraszewski		Transaction ID: 30b-21-04604-04604 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 7 Jefferson Street		Amount of Each Disbursement this Period 50.00
City Belleville State NJ Zip Code 07109		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Theo Pollack		Transaction ID: 30b-21-04605-04605 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 14 North Cobane Terrace		Amount of Each Disbursement this Period 500.00
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Benjamin Schorr		Transaction ID: 30b-21-04607-04607 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 143 Claremont Avenue		Amount of Each Disbursement this Period 50.00
City Montclair State NJ Zip Code 07042		
Purpose of Disbursement Field Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alex Stein		Transaction ID: 30b-21-04608-04608 Date of Disbursement 11 / 10 / 2006	
Mailing Address 40 Godfrey Road		Amount of Each Disbursement this Period 50.00	
City Montclair State NJ Zip Code 07043	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ryan Tice		Transaction ID: 30b-21-04609-04609 Date of Disbursement 11 / 10 / 2006	
Mailing Address 151 Prospect Avenue, Apartment 6F		Amount of Each Disbursement this Period 500.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Natalie Agboyibar		Transaction ID: 30b-21-04610-04610 Date of Disbursement 11 / 10 / 2006	
Mailing Address 64 Tensaw Drive		Amount of Each Disbursement this Period 100.00	
City Browns Mills State NJ Zip Code 08015	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Alecknavage		Transaction ID: 30b-21-04611-04611 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 167 Peregrine Drive		Amount of Each Disbursement this Period 50.00
City Voorhees State NJ Zip Code 08043	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Myra Arroyo		Transaction ID: 30b-21-04612-04612 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1711 Heather Place		Amount of Each Disbursement this Period 100.00
City Clementon State NJ Zip Code 08021	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Karen Badie		Transaction ID: 30b-21-04613-04613 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 520 Collings Avenue Apartment 403B		Amount of Each Disbursement this Period 100.00
City Collingswood State NJ Zip Code 08017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Joshua Bateman		Transaction ID: 30b-21-04614-04614 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 412 Broadway Avenue		Amount of Each Disbursement this Period 100.00
City Westville State NJ Zip Code 08093	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Michael Canary		Transaction ID: 30b-21-04616-04616 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 28 Walnut Street		Amount of Each Disbursement this Period 50.00
City Beachwood State NJ Zip Code 08722	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Judith Dutton		Transaction ID: 30b-21-04617-04617 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 279 Ely Avenue		Amount of Each Disbursement this Period 100.00
City Franklinville State NJ Zip Code 08322	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Faith Franklin Full Name (Last, First, Middle Initial) Mailing Address 200 Mullica Hill Road Box 2011 City Glassboro State NJ Zip Code 08028 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04618-04618 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Danielle Garcia Full Name (Last, First, Middle Initial) Mailing Address 1141 Sheridan Avenue City Bellmawr State NJ Zip Code 08031 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04619-04619 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Gary Garcia Full Name (Last, First, Middle Initial) Mailing Address 1141 Sheridan Ave City Bellmawr State NJ Zip Code 08031 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04620-04620 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Tarr Harris		Transaction ID: 30b-21-04623-04623 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006
Mailing Address 200 Mullica Hill Road		Amount of Each Disbursement this Period 200.00
City Glassboro State NJ Zip Code 08028	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Brian Kratky		Transaction ID: 30b-21-04624-04624 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006
Mailing Address 1268 Robinson Terrace		Amount of Each Disbursement this Period 100.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Timothy Kravitz		Transaction ID: 30b-21-04625-04625 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006
Mailing Address 500 Columbia Avenue		Amount of Each Disbursement this Period 50.00
City Pitman State NJ Zip Code 08071	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Daniel Lohrmann Full Name (Last, First, Middle Initial) Mailing Address 121 Maple Ave City Williamstown State NJ Zip Code 08094 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04626-04626 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Johann Lohrmann Full Name (Last, First, Middle Initial) Mailing Address 121 Maple Avenue City Williamstown State NJ Zip Code 08094 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04627-04627 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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C. Kyle Lohrmann Full Name (Last, First, Middle Initial) Mailing Address 121 Maple Avenue City Williamstown State NJ Zip Code 08094 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04628-04628 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 150.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dru Mealing		Transaction ID: 30b-21-04629-04629 Date of Disbursement 11 / 10 / 2006	
Mailing Address 485 Cary Street		Amount of Each Disbursement this Period 50.00	
City Orange State NJ Zip Code 07050	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kaisha Mercado		Transaction ID: 30b-21-04630-04630 Date of Disbursement 11 / 10 / 2006	
Mailing Address 812 Tulip Street		Amount of Each Disbursement this Period 100.00	
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tammy Mitchell		Transaction ID: 30b-21-04632-04632 Date of Disbursement 11 / 10 / 2006	
Mailing Address 11 Greendale Road		Amount of Each Disbursement this Period 100.00	
City Newton State NJ Zip Code 07860	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Paul Olszewski Full Name (Last, First, Middle Initial) Mailing Address 321 Huntington Avenue City Glendora State NJ Zip Code 08029 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04633-04633 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Maraud Pemberton Full Name (Last, First, Middle Initial) Mailing Address 26 Joseph Drive City Sewell State NJ Zip Code 08080 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04634-04634 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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C. Gregory Richter Full Name (Last, First, Middle Initial) Mailing Address 400 Wood Street City Burlington State NJ Zip Code 08016 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04635-04635 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Fuquan Mutalib		Transaction ID: 30b-21-04638-04638 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 7 Center Way		Amount of Each Disbursement this Period 150.00
City East Orange State NJ Zip Code 07017		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Roland Goodson		Transaction ID: 30b-21-04640-04640 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 310 South Harrison Street		Amount of Each Disbursement this Period 50.00
City East Orange State NJ Zip Code 07018		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. James Watson		Transaction ID: 30b-21-04641-04641 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 74 Garoadner Street.		Amount of Each Disbursement this Period 50.00
City Jersey City State NJ Zip Code 07306		
Purpose of Disbursement Field Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nicolas Ortiz		Transaction ID: 30b-21-04642-04642 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 619 Grove Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07310	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kevin Diggs		Transaction ID: 30b-21-04643-04643 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 49 Clinton Avenue		Amount of Each Disbursement this Period 150.00
City Jersey City State NJ Zip Code 07304	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Yvette Manning		Transaction ID: 30b-21-04644-04644 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 34 Bleeker Street		Amount of Each Disbursement this Period 100.00
City Jersey City State NJ Zip Code 07306	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Janice Williams Full Name (Last, First, Middle Initial) Mailing Address 80 High Street City East Orange State NJ Zip Code 07017 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04645-04645 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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B. Linda Williams Full Name (Last, First, Middle Initial) Mailing Address 22 Belmont Avenue City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04646-04646 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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C. Maria Javier Full Name (Last, First, Middle Initial) Mailing Address 205 Monticello Avenue City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04647-04647 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Thomasina Dunton		Transaction ID: 30b-21-04648-04648 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 51 Grant Avenue 2nd Floor		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Brendan Kelly		Transaction ID: 30b-21-04658-04658 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 123 Fleming Way		Amount of Each Disbursement this Period 480.00
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Glenn Kraemer		Transaction ID: 30b-21-04659-04659 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 23 Whitman Road		Amount of Each Disbursement this Period 480.00
City Trenton State NJ Zip Code 08619	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1210.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Jeremiah Bonifacio Full Name (Last, First, Middle Initial) Mailing Address 1053 Overlook Terrace City Union State NJ Zip Code 07083 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04660-04660 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 100.00 Category/Type
---	--	---

B. Daniel DeJesus Full Name (Last, First, Middle Initial) Mailing Address 128 Green Street City Somerville State NJ Zip Code 08876 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04666-04666 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 200.00 Category/Type
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C. Justin Koo Full Name (Last, First, Middle Initial) Mailing Address 14 lafayette street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04669-04669 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 350.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jessica Kwong		Transaction ID: 30b-21-04670-04670 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 371 Summit Avenue		Amount of Each Disbursement this Period 510.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Victoria Lau		Transaction ID: 30b-21-04671-04671 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 28 Pueblo Court		Amount of Each Disbursement this Period 100.00	
City Morganville State NJ Zip Code 07551	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Vivian Lu		Transaction ID: 30b-21-04672-04672 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 57 Bridge Street		Amount of Each Disbursement this Period 60.00	
City Belleville State NJ Zip Code 07109	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mengyi Luo		Transaction ID: 30b-21-04673-04673 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 37 Hazel Avenue		Amount of Each Disbursement this Period 90.00	
City Livingston State NJ Zip Code 07039	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Hansa Mehta		Transaction ID: 30b-21-04675-04675 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 2523 Linn Avenue		Amount of Each Disbursement this Period 630.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kuleen Mehta		Transaction ID: 30b-21-04676-04676 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 2523 Linn Avenue		Amount of Each Disbursement this Period 320.00	
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1040.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rosella Melgar		Transaction ID: 30b-21-04677-04677 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 24 Peru Street		Amount of Each Disbursement this Period 100.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ibrahim Mendonca		Transaction ID: 30b-21-04678-04678 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 539 Green Street		Amount of Each Disbursement this Period 200.00	
City Elizabeth State NJ Zip Code 07202	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hetal S Patel		Transaction ID: 30b-21-04682-04682 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 23 Minebrook Rd Apt 45A		Amount of Each Disbursement this Period 400.00	
City edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Soniya Patel		Transaction ID: 30b-21-04684-04684 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 24 Datton Dr Apt 155B		Amount of Each Disbursement this Period 230.00
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Yogesh Patel		Transaction ID: 30b-21-04685-04685 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1019 Adams Avenue		Amount of Each Disbursement this Period 150.00
City Union State NJ Zip Code 07083	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Renee Raghoo		Transaction ID: 30b-21-04686-04686 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 435 79th Street		Amount of Each Disbursement this Period 400.00
City North Bergen State NJ Zip Code 07047	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	780.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alkesh Shah		Transaction ID: 30b-21-04687-04687 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 51 Block Avenue		Amount of Each Disbursement this Period 250.00	
City Islen State NJ Zip Code 08830	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Snehal Shah		Transaction ID: 30b-21-04689-04689 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 51 Block Avenue		Amount of Each Disbursement this Period 370.00	
City Islen State NJ Zip Code 08830	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Victor F Soliven		Transaction ID: 30b-21-04690-04690 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 4 Washington Road		Amount of Each Disbursement this Period 150.00	
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	770.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Henry Tsaur		Transaction ID: 30b-21-04692-04692 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 160 A Easton Avenue		Amount of Each Disbursement this Period 200.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Renato Valenzuela		Transaction ID: 30b-21-04693-04693 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 219 Summit Road		Amount of Each Disbursement this Period 675.00
City Elizabeth State NJ Zip Code 07208	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jack Bohrer		Transaction ID: 30b-21-04700-04700 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3 Compton Court		Amount of Each Disbursement this Period 75.00
City Monroe State NJ Zip Code 08831	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Conner Gill Full Name (Last, First, Middle Initial) Mailing Address 6 Rydal Place City Montclair State NJ Zip Code 07042 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04701-04701 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 255.00 Category/Type
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B. John Prignano Full Name (Last, First, Middle Initial) Mailing Address 118 Huntington Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04702-04702 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 20.00 Category/Type
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C. Ryan Sales Full Name (Last, First, Middle Initial) Mailing Address 493 Ryders Lane City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04703-04703 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 300.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	575.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brett Warnebold		Transaction ID: 30b-21-04704-04704 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006	
Mailing Address 148 Baron Lane		Amount of Each Disbursement this Period 400.00	
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Brian Williams		Transaction ID: 30b-21-04706-04706 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006	
Mailing Address 34 Pin Oak Drive		Amount of Each Disbursement this Period 24.00	
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Isaiah Tate		Transaction ID: 30b-21-04707-04707 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006	
Mailing Address 138 Jones Avenue		Amount of Each Disbursement this Period 25.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	449.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Khnam Begum		Transaction ID: 30b-21-04708-04708 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 19 Bell Lane		Amount of Each Disbursement this Period 26.70
City Burlington Twp State NJ Zip Code	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Cassandra Camon		Transaction ID: 30b-21-04709-04709 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 357 Girard Avenue		Amount of Each Disbursement this Period 30.00
City Somerset State NJ Zip Code 08873	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Gregory Shtivelman		Transaction ID: 30b-21-04710-04710 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3 Tunison Court		Amount of Each Disbursement this Period 30.00
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ► **86.70**

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jonathan Collado		Transaction ID: 30b-21-04712-04712 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 677 Wood Avenue		Amount of Each Disbursement this Period 36.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Deyra Diril		Transaction ID: 30b-21-04713-04713 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 5 Dana Circle		Amount of Each Disbursement this Period 36.00
City Edison State NJ Zip Code 08820	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Ruslan Aliev		Transaction ID: 30b-21-04715-04715 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 338 Horizon Drive		Amount of Each Disbursement this Period 36.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	108.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. George Kostis		Transaction ID: 30b-21-04716-04716 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 250 Main Street Apt. 22		Amount of Each Disbursement this Period 36.00
City Spotswood State NJ Zip Code 08884	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. William Brier		Transaction ID: 30b-21-04717-04717 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 18 Norman Street		Amount of Each Disbursement this Period 36.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Shawn Wilkinson		Transaction ID: 30b-21-04718-04718 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3918 Herbertsville Road		Amount of Each Disbursement this Period 36.00
City Point Pleasant State NJ Zip Code 08742	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	108.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ronald Woods		Transaction ID: 30b-21-04719-04719 Date of Disbursement 11 / 10 / 2006	
Mailing Address 51 Schmidt Lane #61A		Amount of Each Disbursement this Period 40.00	
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Abdul Glover		Transaction ID: 30b-21-04720-04720 Date of Disbursement 11 / 10 / 2006	
Mailing Address 20 Abeel Street		Amount of Each Disbursement this Period 40.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sarab Thapar		Transaction ID: 30b-21-04721-04721 Date of Disbursement 11 / 10 / 2006	
Mailing Address 63 Rosemont Terrace		Amount of Each Disbursement this Period 48.00	
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	128.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kevin Burke		Transaction ID: 30b-21-04723-04723 Date of Disbursement 11 / 10 / 2006	
Mailing Address 216 Bald Eagle Drive		Amount of Each Disbursement this Period 60.00	
City Stewartsville	State NJ	Zip Code 08886	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Riti Patel		Transaction ID: 30b-21-04724-04724 Date of Disbursement 11 / 10 / 2006	
Mailing Address 14 Clove Road		Amount of Each Disbursement this Period 60.00	
City Little Falls	State NJ	Zip Code 07424	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jasmine Lyons		Transaction ID: 30b-21-04725-04725 Date of Disbursement 11 / 10 / 2006	
Mailing Address 174 Fulston		Amount of Each Disbursement this Period 65.00	
City New Brunswick	State NJ	Zip Code 08901	
Purpose of Disbursement Field Consulting Services		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	185.00
TOTAL This Period (last page this line number only) ▶	60.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Anderson Garcia		Transaction ID: 30b-21-04726-04726 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 98 Welton Street		Amount of Each Disbursement this Period 66.60
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. James Martinez		Transaction ID: 30b-21-04727-04727 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 445 East 5th Street		Amount of Each Disbursement this Period 70.00
City Plainfield State NJ Zip Code 07060	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Steven Delia		Transaction ID: 30b-21-04728-04728 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 37 Division Street Apt 2		Amount of Each Disbursement this Period 75.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	211.60
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Daniel Gutierrez		Transaction ID: 30b-21-04729-04729 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 6018 Jefferson Street		Amount of Each Disbursement this Period 80.00	
City West New York State NJ Zip Code 07093	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jamila Ford		Transaction ID: 30b-21-04730-04730 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 1 A - B May Street		Amount of Each Disbursement this Period 82.50	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mary Klimik		Transaction ID: 30b-21-04731-04731 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address PO Box 5478		Amount of Each Disbursement this Period 90.00	
City New Brunswick State NJ Zip Code 08903	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	252.50
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Jon Cusack		Transaction ID: 30b-21-04734-04734 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 6 Taylor Road		Amount of Each Disbursement this Period 115.00
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Shanelle Foster		Transaction ID: 30b-21-04735-04735 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 65 Baldwin Street		Amount of Each Disbursement this Period 120.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Kevin Faldu		Transaction ID: 30b-21-04736-04736 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 26 Jon Drive		Amount of Each Disbursement this Period 120.00
City Barnegat State NJ Zip Code 08005	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	355.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brenda Parker		Transaction ID: 30b-21-04737-04737 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 696B Cranbury Cross Road		Amount of Each Disbursement this Period 126.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Andre Childs		Transaction ID: 30b-21-04738-04738 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 382 Dryden		Amount of Each Disbursement this Period 130.00
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Murium Khan		Transaction ID: 30b-21-04739-04739 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 16 Lorraine Terrace		Amount of Each Disbursement this Period 132.00
City Boonton State NJ Zip Code 07005	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	388.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Dawun Williams		Transaction ID: 30b-21-04742-04742 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 65 Baldwin Street		Amount of Each Disbursement this Period 145.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sherry White		Transaction ID: 30b-21-04743-04743 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 181 Redmond Street		Amount of Each Disbursement this Period 204.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Clarimel Cepeda		Transaction ID: 30b-21-04744-04744 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 65 Ampere Parkway		Amount of Each Disbursement this Period 219.96
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	568.96
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Michael Robinson		Transaction ID: 30b-21-04745-04745 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 20-22 Abeel Street		Amount of Each Disbursement this Period 225.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Darnell Johnson		Transaction ID: 30b-21-04746-04746 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 13 Kloster Boulevard Apt 7C		Amount of Each Disbursement this Period 243.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Tania Jones		Transaction ID: 30b-21-04747-04747 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 13 Koster Blvd Apt 7C		Amount of Each Disbursement this Period 258.00
City Edison State NJ Zip Code 08837	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	726.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
New Jersey Democratic State Committee

A. Cali Smith Full Name (Last, First, Middle Initial) Mailing Address 510 McCandless Street City Linden State NJ Zip Code 07036 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04748-04748 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 340.00 Category/Type
--	--	---

B. Susan Ball Full Name (Last, First, Middle Initial) Mailing Address 68 Park Avenue Apartment 405 City Bloomfield State NJ Zip Code 07003 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04749-04749 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 480.00 Category/Type
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C. Kenneth Woods Full Name (Last, First, Middle Initial) Mailing Address 173 Throop Avenue City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04750-04750 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 510.96 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1330.96
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nia Shabazz		Transaction ID: 30b-21-04751-04751 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006	
Mailing Address 1102 Woodhaven Drive		Amount of Each Disbursement this Period 528.00	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Susan Ball		Transaction ID: 30b-21-04752-04752 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006	
Mailing Address 68 Park Avenue Apartment 405		Amount of Each Disbursement this Period 100.00	
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Clarimel Cepeda		Transaction ID: 30b-21-04753-04753 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006	
Mailing Address 65 Ampere Parkway		Amount of Each Disbursement this Period 150.00	
City East Orange State NJ Zip Code 07017	Purpose of Disbursement Field Consulting Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	778.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Steven Delia		Transaction ID: 30b-21-04754-04754 Date of Disbursement 11 / 10 / 2006	
Mailing Address 37 Division Street Apt 2		Amount of Each Disbursement this Period 50.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anderson Garcia		Transaction ID: 30b-21-04755-04755 Date of Disbursement 11 / 10 / 2006	
Mailing Address 98 Welton Street		Amount of Each Disbursement this Period 150.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Gaesha Hayes		Transaction ID: 30b-21-04756-04756 Date of Disbursement 11 / 10 / 2006	
Mailing Address 312 North 3rd Avenue		Amount of Each Disbursement this Period 744.00	
City Highland Park State NJ Zip Code 08904	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	944.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Giselle Herrera		Transaction ID: 30b-21-04757-04757 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 26870 DPO Way		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jessica Kwong		Transaction ID: 30b-21-04758-04758 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 371 Summit Avenue		Amount of Each Disbursement this Period 100.00
City Hackensack State NJ Zip Code 07601	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. James Martinez		Transaction ID: 30b-21-04759-04759 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 445 East 5th Street		Amount of Each Disbursement this Period 50.00
City Plainfield State NJ Zip Code 07060	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Brenda Parker		Transaction ID: 30b-21-04760-04760 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 696B Cranbury Cross Road		Amount of Each Disbursement this Period 150.00
City North Brunswick State NJ Zip Code 08902	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Samuel Pegram		Transaction ID: 30b-21-04761-04761 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 4702 Rockwood Drive		Amount of Each Disbursement this Period 125.00
City Houston State TX Zip Code 77004	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael Robinson		Transaction ID: 30b-21-04762-04762 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 20-22 Abeel Street		Amount of Each Disbursement this Period 50.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Nia Shabazz		Transaction ID: 30b-21-04763-04763 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1102 Woodhaven Drive		Amount of Each Disbursement this Period 200.00
City Edison State NJ Zip Code 08817	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Cali Smith		Transaction ID: 30b-21-04764-04764 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 510 McCandless Street		Amount of Each Disbursement this Period 100.00
City Linden State NJ Zip Code 07036	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sherry White		Transaction ID: 30b-21-04765-04765 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 181 Redmond Street		Amount of Each Disbursement this Period 150.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1760 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kenneth Woods		Transaction ID: 30b-21-04766-04766 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 173 Throop Avenue		Amount of Each Disbursement this Period 100.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Genevieve Abrams		Transaction ID: 30b-21-04767-04767 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2412 North Pallor		Amount of Each Disbursement this Period 330.00
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tyrese Beatty		Transaction ID: 30b-21-04770-04770 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1408 Newkirk St.		Amount of Each Disbursement this Period 50.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Megan Blackburn		Transaction ID: 30b-21-04771-04771 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2029 North Broad Street		Amount of Each Disbursement this Period 160.00
City Philadelphia State PA Zip Code 19122	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Earlene Bly		Transaction ID: 30b-21-04772-04772 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 5526 Crowson St		Amount of Each Disbursement this Period 200.00
City Philadelphia State PA Zip Code 19144	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Amelia Brenton		Transaction ID: 30b-21-04773-04773 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 23 West Gowen Street		Amount of Each Disbursement this Period 150.00
City Philadelphia State PA Zip Code 19119	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	510.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1762 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Shawn-Douglas Brown		Transaction ID: 30b-21-04775-04775 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1147 South Wilton Street		Amount of Each Disbursement this Period 250.00
City Philadelphia State PA Zip Code 19143	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Norton Casha		Transaction ID: 30b-21-04777-04777 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 5526 Crowson Street		Amount of Each Disbursement this Period 50.00
City Philadelphia State PA Zip Code 19144	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Matthew Chase		Transaction ID: 30b-21-04778-04778 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1600 North Broad Street #717		Amount of Each Disbursement this Period 280.00
City Philadelphia State PA Zip Code 19121	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	580.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Heather Clark		Transaction ID: 30b-21-04779-04779 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1801 North Howard Street #2		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19122	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Guy Collina		Transaction ID: 30b-21-04780-04780 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1320 South Divinity Street		Amount of Each Disbursement this Period 60.00
City Philadelphia State PA Zip Code 19143	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Regina Cooper		Transaction ID: 30b-21-04782-04782 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3862 West Frankin		Amount of Each Disbursement this Period 150.00
City Philadelphia State PA Zip Code 19146	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	390.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Gloria Crittenden		Transaction ID: 30b-21-04783-04783 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2820 N. Stillman Street		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sam Cunningham		Transaction ID: 30b-21-04784-04784 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1708 North Bouvier		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Lorraine Daliessio		Transaction ID: 30b-21-04785-04785 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 843 North Lawrence Street		Amount of Each Disbursement this Period 396.00
City Philadelphia State PA Zip Code 19106	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	596.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Saul Delvalle		Transaction ID: 30b-21-04786-04786 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 205 East Monmouth Street		Amount of Each Disbursement this Period 150.00
City Philadelphia State PA Zip Code 19134	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Full Name (Last, First, Middle Initial) B. Joseph Florence		

Full Name (Last, First, Middle Initial) B. Joseph Florence		Transaction ID: 30b-21-04788-04788 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3208 17th Street NW		Amount of Each Disbursement this Period 480.00
City Washington State DC Zip Code 20010	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Full Name (Last, First, Middle Initial) C. Gail Gayle		

Full Name (Last, First, Middle Initial) C. Gail Gayle		Transaction ID: 30b-21-04789-04789 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3209 West Clifford Street		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	730.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Matthew Gibson		Transaction ID: 30b-21-04790-04790 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2429 South 12th Street		Amount of Each Disbursement this Period 500.00
City Philadelphia State PA Zip Code 19148	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gonzalez Juan		Transaction ID: 30b-21-04791-04791 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2055 East Monmouth Street		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19134	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Soyni Grimes		Transaction ID: 30b-21-04792-04792 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3845 North Franklin Street		Amount of Each Disbursement this Period 200.00
City Philadelphia State PA Zip Code 19122	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Faith Harrison Full Name (Last, First, Middle Initial) Mailing Address 1233 South 18th Street City Philadelphia State PA Zip Code 19146 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04794-04794 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 50.00 Category/Type
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B. Christopher Hayden Full Name (Last, First, Middle Initial) Mailing Address 1413 South 4th Street City Philadelphia State PA Zip Code 19147 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04795-04795 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 230.00 Category/Type
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C. Nicole Hogan Full Name (Last, First, Middle Initial) Mailing Address 3532 N.8th St City Philadelphia State PA Zip Code 19140 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04797-04797 Date of Disbursement 11 / 10 / 2006 Amount of Each Disbursement this Period 60.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	340.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Manuel Jose		Transaction ID: 30b-21-04799-04799 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1565 Collings Road		Amount of Each Disbursement this Period 180.00
City Camden State NJ Zip Code 08104	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ashir Khondker		Transaction ID: 30b-21-04800-04800 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1423 South 4th Street		Amount of Each Disbursement this Period 110.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Yeaty Kpnou		Transaction ID: 30b-21-04801-04801 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1681 North 15th Street #418A		Amount of Each Disbursement this Period 120.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	410.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ian Kysel		Transaction ID: 30b-21-04802-04802 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2009 14th Street NW		Amount of Each Disbursement this Period 480.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Dave Laverdure		Transaction ID: 30b-21-04803-04803 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 578 E. Cambria		Amount of Each Disbursement this Period 70.00
City Philadelphia State PA Zip Code 19134	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. James Lusardi		Transaction ID: 30b-21-04805-04805 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1320 S. Divinity St.		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19143	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	730.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Theresea Lyles		Transaction ID: 30b-21-04806-04806 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3119 Clifford Street		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kali Milgate		Transaction ID: 30b-21-04809-04809 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1300 Cecil B. Moore Ave S104		Amount of Each Disbursement this Period 240.00
City Philadelphia State PA Zip Code 19122	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jeff Mott		Transaction ID: 30b-21-04813-04813 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 581 General Know Road		Amount of Each Disbursement this Period 240.00
City Philadelphia State PA Zip Code 19406	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	580.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aziz Nifeesa		Transaction ID: 30b-21-04814-04814 Date of Disbursement 11 / 10 / 2006	
Mailing Address 3412 A Street		Amount of Each Disbursement this Period 200.00	
City Philadelphia State PA Zip Code 19134	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. April Pinder		Transaction ID: 30b-21-04815-04815 Date of Disbursement 11 / 10 / 2006	
Mailing Address 4277 Leidy Lane		Amount of Each Disbursement this Period 100.00	
City Philadephia State PA Zip Code 19140	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jessica Piraneo		Transaction ID: 30b-21-04816-04816 Date of Disbursement 11 / 10 / 2006	
Mailing Address 2139 Manton Street		Amount of Each Disbursement this Period 300.00	
City Philadelphia State PA Zip Code 19146	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Trevor Polk		Transaction ID: 30b-21-04817-04817 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 30 Gylnn Court		Amount of Each Disbursement this Period 220.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Starlanda Pralour		Transaction ID: 30b-21-04818-04818 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3209 Clifford Street		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jennifer Rice		Transaction ID: 30b-21-04819-04819 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1423 South 4th Street		Amount of Each Disbursement this Period 170.00
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	490.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Nicole Richardson</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 138 North Yewdall Street</p> <p>City Philadelphia State PA Zip Code 19139</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-04820-04820</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="400.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>B. Trina Rivers</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3120 North Sheridan</p> <p>City Philadelphia State PA Zip Code 19121</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-04821-04821</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>C. Bezaleel Rojas</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 35 South 33rd Street</p> <p>City Camden State NJ Zip Code 08105</p> <p>Purpose of Disbursement Field Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 30b-21-04822-04822</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="890.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Latesha Rucker		Transaction ID: 30b-21-04823-04823 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 116 North 51st Street		Amount of Each Disbursement this Period 400.00	
City Philadelphia State PA Zip Code 19139	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Roberto Segan		Transaction ID: 30b-21-04825-04825 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 526 Wilder Street		Amount of Each Disbursement this Period 600.00	
City Philadelphia State PA Zip Code 19147	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jenny Sewell		Transaction ID: 30b-21-04826-04826 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Mailing Address 2029 N. Broqd St. 717A		Amount of Each Disbursement this Period 120.00	
City Philadelphia State PA Zip Code 19122	Purpose of Disbursement Field Consulting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1120.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Clarence Smith		Transaction ID: 30b-21-04828-04828 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2820 North Stillman Street		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19132	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Joseph Smith		Transaction ID: 30b-21-04829-04829 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1614 South 27th Street		Amount of Each Disbursement this Period 170.00
City Philadelphia State PA Zip Code 19102	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Octavia Smith		Transaction ID: 30b-21-04830-04830 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3131 West Montgomery Avenue		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Quenzellia Smith		Transaction ID: 30b-21-04831-04831 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3131 West Montgomery Avenue		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Stan Soroka		Transaction ID: 30b-21-04832-04832 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3338 Richlieu Rd. V307		Amount of Each Disbursement this Period 170.00
City Bensalem State PA Zip Code 19020	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Clinton Thomas		Transaction ID: 30b-21-04834-04834 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3236 West Berk Street		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Christopher Ward		Transaction ID: 30b-21-04836-04836 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2121 Bancroft Street		Amount of Each Disbursement this Period 180.00
City Philadelphia State PA Zip Code 19148	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dana Wheeler		Transaction ID: 30b-21-04837-04837 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 1420 North 32nd Street		Amount of Each Disbursement this Period 360.00
City Philadelphia State PA Zip Code 19134	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Deborah Wheeler		Transaction ID: 30b-21-04838-04838 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 2420 North 32nd Street		Amount of Each Disbursement this Period 330.00
City Philadelphia State PA Zip Code 19132	Category/ Type	
Purpose of Disbursement Field Consulting Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	870.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) J. Richard Winborne		Transaction ID: 30b-21-04840-04840 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 215 South 49th Street		Amount of Each Disbursement this Period 240.00
City Philadelphia State PA Zip Code 19139	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Zykia Wright		Transaction ID: 30b-21-04841-04841 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 5934 North 12th Street		Amount of Each Disbursement this Period 60.00
City Philadelphia State PA Zip Code 19141	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Matthew Zinader		Transaction ID: 30b-21-04842-04842 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 404 Fernwood Avenue		Amount of Each Disbursement this Period 864.00
City Millville State NJ Zip Code 08332	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1164.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Carlos Badillo		Transaction ID: 30b-21-04844-04844 Date of Disbursement 11 / 10 / 2006	
Mailing Address 26 West Mont		Amount of Each Disbursement this Period 390.00	
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ines Bermudez		Transaction ID: 30b-21-04845-04845 Date of Disbursement 11 / 10 / 2006	
Mailing Address 1006 East Park		Amount of Each Disbursement this Period 390.00	
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Isis Casillas		Transaction ID: 30b-21-04846-04846 Date of Disbursement 11 / 10 / 2006	
Mailing Address 317 South 8th Street		Amount of Each Disbursement this Period 340.00	
City Vineland State NJ Zip Code 08360	Purpose of Disbursement Field Consulting Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1120.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Debbie Harris		Transaction ID: 30b-21-04849-04849 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 303 Jefferson Street		Amount of Each Disbursement this Period 75.00
City Hoboken State NJ Zip Code 07030	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Matthew Greco		Transaction ID: 30b-21-04878-04878 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 337 Pavonia Avenue		Amount of Each Disbursement this Period 75.00
City Jersey City State NJ Zip Code 07302	Purpose of Disbursement Field Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Enriquillo Jose		Transaction ID: 30b-21-04893-04893 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 357 Morse Street		Amount of Each Disbursement this Period 864.00
City Camden State NJ Zip Code 08105	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1014.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Margaret L. Martin		Transaction ID: 30b-22-00150-00168 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 777 West State Street, Apt. 9B		Amount of Each Disbursement this Period 40.00
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Travel Expenses	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Michael Muller		Transaction ID: 30b-22-00151-00169 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 2323 Larchmont Place		Amount of Each Disbursement this Period 3000.00
City State Zip Code Mount Laurel NJ 08054	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. New Jersey State Employees Health Benefits Fund		Transaction ID: 30b-22-00152-00170 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address P.O. Box 001		Amount of Each Disbursement this Period 445.20
City State Zip Code Trenton NJ 08625	Purpose of Disbursement Health Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3485.20
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Krystal Bradshaw Full Name (Last, First, Middle Initial) Mailing Address 216 Rhode Island Avenue 2nd Floor City East Orange State NJ Zip Code 07018 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04895-04895 Date of Disbursement 11 / 13 / 2006 Amount of Each Disbursement this Period 500.00 Category/Type
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B. Gaesha Hayes Full Name (Last, First, Middle Initial) Mailing Address 312 North 3rd Avenue City Highland Park State NJ Zip Code 08904 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04896-04896 Date of Disbursement 11 / 13 / 2006 Amount of Each Disbursement this Period 588.00 Category/Type
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C. Brendan Cassidy Full Name (Last, First, Middle Initial) Mailing Address 122 Huntington Street City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-21-04897-04897 Date of Disbursement 11 / 13 / 2006 Amount of Each Disbursement this Period 270.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1358.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. CitiGroup		Transaction ID: 30b-01-03314-0000 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address PO Box 183055		Amount of Each Disbursement this Period 4523.83
City Columbus State OH Zip Code 43218	Purpose of Disbursement See Memo Items Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Exxon		Transaction ID: 30b-01-03314-05394 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 3710 US Highway 1		Amount of Each Disbursement this Period 36.00
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Sunoco		Transaction ID: 30b-01-03314-05396 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address Atlantic City Expressway		Amount of Each Disbursement this Period 44.00
City Hammonton State NJ Zip Code 08037	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	4523.83
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Courier Car Rental		Transaction ID: 30b-01-03314-05392 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 19 Wright Way		Amount of Each Disbursement this Period 4395.84
City Fairfield State NJ Zip Code 07004	[MEMO ITEM]	
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Fanwood Petroleum		Transaction ID: 30b-01-03314-05395 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 185 South Avenue		Amount of Each Disbursement this Period 37.29
City Fanwood State NJ Zip Code 07023	[MEMO ITEM]	
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Getty		Transaction ID: 30b-01-03314-05393 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 1213 Route 27		Amount of Each Disbursement this Period 10.70
City Franklin State NJ Zip Code 08873	[MEMO ITEM]	
Purpose of Disbursement Travel Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Niel D Stender Full Name (Last, First, Middle Initial) Mailing Address 154 Herbert Avenue City Fanwood State NJ Zip Code 07023 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03315-05397 Date of Disbursement 11 / 14 / 2006 Amount of Each Disbursement this Period 750.00
--	--	--

B. Jon Evans Full Name (Last, First, Middle Initial) Mailing Address 1 Ithanell Road City Hoptcong State NJ Zip Code 07843 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03316-05398 Date of Disbursement 11 / 14 / 2006 Amount of Each Disbursement this Period 750.00
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C. Kevin John Cutro Full Name (Last, First, Middle Initial) Mailing Address 741 Oak Avenue City Westfield State NJ Zip Code 07090 Purpose of Disbursement Field Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-01-03317-05399 Date of Disbursement 11 / 14 / 2006 Amount of Each Disbursement this Period 750.00
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SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Samuel Reisen		Transaction ID: 30b-01-03318-05400 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 615 Prospect Street		Amount of Each Disbursement this Period 750.00
City State Zip Code Maplewood NJ 07040	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Nicholas H Fixmer		Transaction ID: 30b-01-03319-05401 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 381 Fawnridge Drive		Amount of Each Disbursement this Period 1750.00
City State Zip Code Scotch Plains NJ 07076	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Capital Rainbowfest, Inc.		Transaction ID: 30b-01-03321-05403 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address PO Box 299		Amount of Each Disbursement this Period -50.00
City State Zip Code Trenton NJ 08608	Purpose of Disbursement Prior Period Void (Invalid) Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2450.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ronell Surrell Full Name (Last, First, Middle Initial) Mailing Address 165 Grand Avenue City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08633-08766 Date of Disbursement 11 / 14 / 2006 Amount of Each Disbursement this Period -250.00 Category/Type
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B. Jose Martinez Full Name (Last, First, Middle Initial) Mailing Address 205 Monticello Street Apartment 1 City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08634-08767 Date of Disbursement 11 / 14 / 2006 Amount of Each Disbursement this Period -644.00 Category/Type
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C. Crystal Fantauzzi Full Name (Last, First, Middle Initial) Mailing Address 224 Whiton Street City Jersey City State NJ Zip Code 07304 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08635-08768 Date of Disbursement 11 / 14 / 2006 Amount of Each Disbursement this Period -247.50 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	-1141.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Cinthya Toledo		Transaction ID: 30b-16-08636-08769 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 111 Lincoln Street		Amount of Each Disbursement this Period -245.00
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Johanna Recinos		Transaction ID: 30b-16-08637-08770 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 7 Main Terrace		Amount of Each Disbursement this Period -290.00
City Bloomfield State NJ Zip Code 07003	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Heather Nelson		Transaction ID: 30b-16-08638-08771 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 100 Kensington Avenue		Amount of Each Disbursement this Period -210.00
City Jersey City State NJ Zip Code 07304	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	-745.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Lillie Nash Full Name (Last, First, Middle Initial) Mailing Address 624 Nye Avenue City Irvington State NJ Zip Code 71111 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08639-08772 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period -50.00 Category/Type
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B. Terrace Williams-Parks Full Name (Last, First, Middle Initial) Mailing Address 659 Chancellor Ave City Irvington State NJ Zip Code 07111 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08640-08773 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period -50.00 Category/Type
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C. Wanda Yancy Full Name (Last, First, Middle Initial) Mailing Address 19-21 Mount Vernon Avenue City Irvington State NJ Zip Code 07111 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08641-08774 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period -50.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	-150.00
TOTAL This Period (last page this line number only) ▶	-150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Terence Barge		Transaction ID: 30b-16-08646-08779 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 127 Harrington Lane		Amount of Each Disbursement this Period -80.00
City Willingboro State NJ Zip Code 08046		
Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dean Chai		Transaction ID: 30b-16-08649-08782 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 6034 Eli Circle		Amount of Each Disbursement this Period -50.00
City Macungie State PA Zip Code 18062		
Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. David Snyder		Transaction ID: 30b-16-08650-08783 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 110 Claremont Place		Amount of Each Disbursement this Period -50.00
City Cranford State NJ Zip Code 07016		
Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	-180.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Fabiola Tony</p> <p>Mailing Address 1947 Steeplechase Drive</p> <p>City Williamstown State NJ Zip Code 08094</p> <p>Purpose of Disbursement Prior Period Void (Invalid)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-16-08651-08784</p> <p>Date of Disbursement 11 / 14 / 2006</p> <p>Amount of Each Disbursement this Period -285.00</p>
<p>B. Full Name (Last, First, Middle Initial) Jon Cusack</p> <p>Mailing Address 6 Taylor Road</p> <p>City Princeton State NJ Zip Code 08540</p> <p>Purpose of Disbursement Prior Period Void (Invalid)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-16-08652-08785</p> <p>Date of Disbursement 11 / 14 / 2006</p> <p>Amount of Each Disbursement this Period -32.50</p>
<p>C. Full Name (Last, First, Middle Initial) Amish Shodhan</p> <p>Mailing Address 35 Richardson Street</p> <p>City New Brunswick State NJ Zip Code 08901</p> <p>Purpose of Disbursement Prior Period Void (Invalid)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 30b-16-08653-08786</p> <p>Date of Disbursement 11 / 14 / 2006</p> <p>Amount of Each Disbursement this Period -15.00</p>

SUBTOTAL of Disbursements This Page (optional) ► **-332.50**

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Dipan Patel</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7 Oxford Court</p> <p>City Kendall Park State NJ Zip Code 08824</p> <p>Purpose of Disbursement Prior Period Void (Invalid)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-16-08654-08787</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="-15.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. William Clax</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 64 Storm Avenue</p> <p>City Jersey City State NJ Zip Code 07306</p> <p>Purpose of Disbursement Prior Period Void (Invalid)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-16-08655-08788</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="-290.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Bobby Taylor</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 200 Vanhorne Street</p> <p>City Jersey City State NJ Zip Code 07304</p> <p>Purpose of Disbursement Prior Period Void (Invalid)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 30b-16-08656-08789</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="-215.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="-520.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Khadijah Williams		Transaction ID: 30b-16-08657-08790 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 22 Belmont Avenue		Amount of Each Disbursement this Period -100.00
City Jersey City State NJ Zip Code 07304		
Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nick Fernandez		Transaction ID: 30b-16-08658-08791 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 260 East Pierrepont		Amount of Each Disbursement this Period -40.00
City Rutherford State NJ Zip Code 07070		
Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Donald Mckenney		Transaction ID: 30b-16-08660-08793 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 270 Washington Street, Apt #1		Amount of Each Disbursement this Period -50.00
City Newark State NJ Zip Code 07102		
Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	-190.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Agnieszka Grebowiec		Transaction ID: 30b-16-08661-08794 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6	
Mailing Address 65 Heights Road		Amount of Each Disbursement this Period -5.00	
City Wayne State NJ Zip Code 07470	Purpose of Disbursement Prior Period Void (Reissued)	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Khelli Dowdell		Transaction ID: 30b-16-08662-08795 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6	
Mailing Address 231 Court Street		Amount of Each Disbursement this Period -50.00	
City Newark State NJ Zip Code 07103	Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Joyce Quijano		Transaction ID: 30b-16-08664-08797 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6	
Mailing Address 38 Ravine Avenue		Amount of Each Disbursement this Period -50.00	
City Jersey City State NJ Zip Code 07307	Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	-105.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Eunice Bearfield		Transaction ID: 30b-16-08666-08799 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 174 Waverly Avenue, Apt#3C		Amount of Each Disbursement this Period -50.00
City Newark State NJ Zip Code 07103	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gwendolyn Bethea		Transaction ID: 30b-16-08667-08800 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 225 Drake Avenue		Amount of Each Disbursement this Period -50.00
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tyrone Jackson		Transaction ID: 30b-16-08668-08801 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 1 Columbia Place		Amount of Each Disbursement this Period -50.00
City Parlin State NJ Zip Code 08859	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	-150.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Rent A Wreck		Transaction ID: 30b-16-08669-08802
Mailing Address 916 Route 9		Date of Disbursement MM / DD / YYYY 11 / 14 / 2006
City Parlin	State NJ	Zip Code 08859
Purpose of Disbursement Prior Period Void (Invalid)		Amount of Each Disbursement this Period -1265.40
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Ray Alcantara		Transaction ID: 30b-01-03322-05404
Mailing Address 52 Wood Lake Drive		Date of Disbursement MM / DD / YYYY 11 / 15 / 2006
City Piscataway	State NJ	Zip Code 08854
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 1978.14
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Gerald Balmir		Transaction ID: 30b-01-03323-05405
Mailing Address 212 Columbia Avenue		Date of Disbursement MM / DD / YYYY 11 / 15 / 2006
City Trenton	State NJ	Zip Code 08618
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 2941.60
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	3654.34
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Arleen Barcenas		Transaction ID: 30b-01-03324-05406 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 338 East 29th Street		Amount of Each Disbursement this Period 1281.36
City Paterson State NJ Zip Code 07514	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Milena T Caraballo		Transaction ID: 30b-01-03325-05407 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 627 Highland Avenue		Amount of Each Disbursement this Period 780.30
City Newark State NJ Zip Code 07104	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Ryan Carbain		Transaction ID: 30b-01-03326-05408 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 325 Hudson Drive		Amount of Each Disbursement this Period 966.36
City Brick State NJ Zip Code 08028	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3028.02
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Keith C Carbone		Transaction ID: 30b-01-03327-05409 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 532 Ryeside Avenue		Amount of Each Disbursement this Period 1478.15
City New Milford State NJ Zip Code 07646	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. May Chiang		Transaction ID: 30b-01-03328-05410 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 34 West 94th Street Apartment 4B		Amount of Each Disbursement this Period 1030.73
City New York State NY Zip Code 10025	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Victor Cirilo		Transaction ID: 30b-01-03329-05411 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 1941.85
City West Orange State NJ Zip Code 07052	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4450.73
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Laurie K DeMarco		Transaction ID: 30b-01-03330-05412 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 3501 Balmoral Court		Amount of Each Disbursement this Period 987.82
City Freehold State NJ Zip Code 07728	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. John Duthie		Transaction ID: 30b-01-03331-05413 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 100 Robbinsville Allentown Road		Amount of Each Disbursement this Period 1501.56
City Robbinsville State NJ Zip Code 08691	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sean P Faughnan		Transaction ID: 30b-01-03332-05414 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 145 Stiles Street Apt 12C		Amount of Each Disbursement this Period 1441.24
City Elizabeth State NJ Zip Code 07208	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3930.62
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Charles Featherson		Transaction ID: 30b-01-03333-05415 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 433 East 31st Street		Amount of Each Disbursement this Period 1290.43
City Paterson State NJ Zip Code 07504	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hans P Goff		Transaction ID: 30b-01-03334-05416 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 5 Cadawalder Drive		Amount of Each Disbursement this Period 1830.19
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Katherine F Hedden		Transaction ID: 30b-01-03335-05417 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 335 Masterson Court		Amount of Each Disbursement this Period 1682.54
City Ewing State NJ Zip Code 08618	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4803.16
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam P Heiser		Transaction ID: 30b-01-03336-05418 Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
Mailing Address 173 Pompton Avenue		Amount of Each Disbursement this Period 966.36	
City Hawthorne State NJ Zip Code 07506	Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Abubakar Jalloh		Transaction ID: 30b-01-03337-05419 Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
Mailing Address 127 Oakly Street		Amount of Each Disbursement this Period 1441.24	
City Roselle State NJ Zip Code 07203	Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Peter Joseph		Transaction ID: 30b-01-03338-05420 Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
Mailing Address 110 Gloucester Drive		Amount of Each Disbursement this Period 1135.95	
City Lawnside State NJ Zip Code 08045	Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3543.55
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ace F. Laluces		Transaction ID: 30b-01-03339-05421	
Mailing Address 477 Clark Place		Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
City Union	State NJ	Zip Code 07083	Amount of Each Disbursement this Period 1009.27
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Michael Lang		Transaction ID: 30b-01-03340-05422	
Mailing Address 27 Hawthorne Road		Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
City Sicklerville	State NJ	Zip Code 08081	Amount of Each Disbursement this Period 1135.95
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Pamela Luster		Transaction ID: 30b-01-03341-05423	
Mailing Address 2237 Helen Avenue		Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
City Vineland	State NJ	Zip Code 08360	Amount of Each Disbursement this Period 1779.78
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3925.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Ivette Martinez		Transaction ID: 30b-01-03342-05424 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 538 McBride Avenue		Amount of Each Disbursement this Period 1964.67
City West Patterson State NJ Zip Code 07524	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Gloria Montealegre		Transaction ID: 30b-01-03343-05425 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 510 McCandless Street		Amount of Each Disbursement this Period 4751.68
City Linden State NJ Zip Code 07036	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Eric Myers		Transaction ID: 30b-01-03344-05426 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 274 Millbridge Avenue		Amount of Each Disbursement this Period 1453.15
City Clementon State NJ Zip Code 08021	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	8169.50
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam Neary		Transaction ID: 30b-01-03345-05427 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 108 Commons Drive		Amount of Each Disbursement this Period 1893.67
City East Brunswick State NJ Zip Code 08816	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nicole Nestopoulous		Transaction ID: 30b-01-03346-05428 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1306 Hannock Drive #2		Amount of Each Disbursement this Period 1268.65
City Barrington State NJ Zip Code 08007	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Summer Oesch		Transaction ID: 30b-01-03347-05429 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 515 1/2 Evergreen Avenue		Amount of Each Disbursement this Period 2793.89
City Bradley Beach State NJ Zip Code 07720	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5956.21
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Omar Perez		Transaction ID: 30b-01-03348-05430 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 148 Mercer Street		Amount of Each Disbursement this Period 727.33
City Jersey City State NJ Zip Code 07302		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Zaida E Polanco		Transaction ID: 30b-01-03349-05431 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 293 Paulison Avenue		Amount of Each Disbursement this Period 1327.34
City Passaic State NJ Zip Code 07055		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael D Reed		Transaction ID: 30b-01-03350-05432 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 109 Spring Street		Amount of Each Disbursement this Period 1216.81
City Trenton State NJ Zip Code 08618		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3271.48
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Andre M Richardson		Transaction ID: 30b-01-03351-05433 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1755 JFK Boulevard Apartment 1		Amount of Each Disbursement this Period 2485.92
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Alfredo Rivera		Transaction ID: 30b-01-03352-05434 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address PO Box 40034		Amount of Each Disbursement this Period 1441.24
City Newark State NJ Zip Code 07104	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Frank Schultz		Transaction ID: 30b-01-03353-05435 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 12 McKinley Avenue		Amount of Each Disbursement this Period 966.36
City Blackwood State NJ Zip Code 08012	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4893.52
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Safanya Searcy		Transaction ID: 30b-01-03354-05436 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 272 17th Avenue		Amount of Each Disbursement this Period 1281.17
City Newark State NJ Zip Code 07103	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joseph Shields		Transaction ID: 30b-01-03355-05437 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 700 Lower State Road Apt. 904		Amount of Each Disbursement this Period 3160.13
City North Wales State PA Zip Code 19454	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Adam Silverstein		Transaction ID: 30b-01-03356-05438 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 0 - 111 Blue Hill		Amount of Each Disbursement this Period 1592.05
City Fair Lawn State NJ Zip Code 07410	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	6033.35
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Jim Sinclair		Transaction ID: 30b-01-03357-05439 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 106 Oak Pines Boulevard		Amount of Each Disbursement this Period 2294.02
City Pemberton State NJ Zip Code 08608	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. David M Smith		Transaction ID: 30b-01-03358-05440 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 50 New Friendship Road		Amount of Each Disbursement this Period 1135.95
City Howell State NJ Zip Code 07731	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. James Souder		Transaction ID: 30b-01-03359-05441 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 893 Broadway Avenue		Amount of Each Disbursement this Period 2602.98
City Newark State NJ Zip Code 07104	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6032.95
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alescia Teel		Transaction ID: 30b-01-03360-05442 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 518 Johnston Avenue		Amount of Each Disbursement this Period 2083.04
City Hamilton State NJ Zip Code 08629	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Caitlin J VanOrden		Transaction ID: 30b-01-03361-05443 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1560 Linden Boulevard		Amount of Each Disbursement this Period 987.82
City Vineland State NJ Zip Code 08361	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bryan Walensky		Transaction ID: 30b-01-03362-05444 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 76 Dewitt Street		Amount of Each Disbursement this Period 1628.96
City Garfield State NJ Zip Code 07026	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4699.82
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Terry West		Transaction ID: 30b-01-03363-05445 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 141 Mercer Street		Amount of Each Disbursement this Period 2776.96
City Trenton	State NJ	
Zip Code 08608		
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Charles W Williams		Transaction ID: 30b-01-03364-05446 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 80 High Street		Amount of Each Disbursement this Period 1681.00
City West Orange	State NJ	
Zip Code 07052		
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Dale Wolfert		Transaction ID: 30b-01-03365-05447 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 59 Bosko Drive		Amount of Each Disbursement this Period 1628.96
City East Brunswick	State NJ	
Zip Code 08816		
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	6086.92
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1811 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Ryan Yacco Full Name (Last, First, Middle Initial) Mailing Address 218 Easton Avenue City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 30b-01-03366-05448 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period 966.36 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Elizabeth E. Berry Full Name (Last, First, Middle Initial) Mailing Address 100 Robbinsville - Allentown Road City Robbinsville State NJ Zip Code 08691 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 30b-01-03367-05449 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period 1306.62 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Carmen N. Brown Full Name (Last, First, Middle Initial) Mailing Address 54 Jacob Court City Ewing State NJ Zip Code 08628 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 30b-01-03368-05450 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period 1073.03 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3346.01
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1812 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mary Campbell		Transaction ID: 30b-01-03370-05452 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 2055 Lawrence Road		Amount of Each Disbursement this Period 966.36
City Lawrenceville State NJ Zip Code 08648		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Daniel C. Dollbaum		Transaction ID: 30b-01-03371-05453 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 6 Butler Place		Amount of Each Disbursement this Period 2260.90
City Kearny State NJ Zip Code 07032		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Diane Legreide		Transaction ID: 30b-01-03372-05454 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 68 Brant Drive		Amount of Each Disbursement this Period 1765.99
City Brick State NJ Zip Code 08724		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4993.25
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Margaret L. Martin		Transaction ID: 30b-01-03373-05455 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 777 West State Street, Apt. 9B		Amount of Each Disbursement this Period 1486.29	
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Salary Candidate Name Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Richard P McGrath		Transaction ID: 30b-01-03374-05456 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 100 Hiram Square		Amount of Each Disbursement this Period 3036.60	
City State Zip Code New Brunswick NJ 08901	Purpose of Disbursement Salary Candidate Name Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Roberto C Frugone		Transaction ID: 30b-01-03375-05457 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 184 Peer Place		Amount of Each Disbursement this Period 1836.92	
City State Zip Code Denville NJ 07834	Purpose of Disbursement Salary Candidate Name Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	6359.81
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. United States Federal Government		Transaction ID: 30b-01-03376-05458 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 36682.61
City Washington State DC Zip Code 20001		
Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. State of New Jersey		Transaction ID: 30b-01-03377-05459 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address Department of Treasury		Amount of Each Disbursement this Period 6262.43
City Trenton State NJ Zip Code 08608		
Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Darren Stribling		Transaction ID: 30b-16-08672-08805 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 27 Efland Lane		Amount of Each Disbursement this Period -120.00
City Willingboro State NJ Zip Code 08046		
Purpose of Disbursement Prior Period Void (Invalid) Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	42825.04
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Hasan Trower Full Name (Last, First, Middle Initial) Mailing Address 58 Edgemont Lane City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08673-08806 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period -40.00 Category/Type
---	--	---

B. Reva Foster Full Name (Last, First, Middle Initial) Mailing Address 31 Tweedstone City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08676-08809 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period -80.00 Category/Type
---	--	---

C. Edward M. McFadden Full Name (Last, First, Middle Initial) Mailing Address 92 Club House Drive City Willingboro State NJ Zip Code 08046 Purpose of Disbursement Prior Period Void (Invalid) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 30b-16-08677-08810 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period -80.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	-200.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Selia A. McFadden		Transaction ID: 30b-16-08678-08811 Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
Mailing Address 92 Club House Drive		Amount of Each Disbursement this Period -80.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mark Myers		Transaction ID: 30b-16-08679-08812 Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
Mailing Address 27 Noland Lane		Amount of Each Disbursement this Period -80.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. William Owens		Transaction ID: 30b-16-08680-08813 Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
Mailing Address 122 Harrington Lane		Amount of Each Disbursement this Period -120.00	
City Willingboro State NJ Zip Code 08046	Purpose of Disbursement Prior Period Void (Invalid)	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	-280.00
TOTAL This Period (last page this line number only) ▶	-280.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Kelvin Hayes		Transaction ID: 30b-16-08681-08814 Date of Disbursement 11 / 15 / 2006
Mailing Address 14 Sherman Path		Amount of Each Disbursement this Period -120.00
City Mt. Laurel State NJ Zip Code 08054	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Trevian Chandler		Transaction ID: 30b-16-08682-08815 Date of Disbursement 11 / 15 / 2006
Mailing Address 138 Plumtree Lane		Amount of Each Disbursement this Period -40.00
City Willingboro State NJ Zip Code 08047	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Orlando Gonzalez		Transaction ID: 30b-16-08683-08816 Date of Disbursement 11 / 15 / 2006
Mailing Address 711 Highland Avenue		Amount of Each Disbursement this Period -100.00
City Newark State NJ Zip Code 07104	Purpose of Disbursement Prior Period Void (Invalid)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	-260.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

<p>A. Full Name (Last, First, Middle Initial) Karina Graidelle</p>		<p>Transaction ID: 30b-16-08684-08817 Date of Disbursement</p>	
<p>Mailing Address 333 Parker Street</p>		<p><input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/></p>	
<p>City Newark State NJ Zip Code 07104</p>	<p>Amount of Each Disbursement this Period</p> <p style="text-align: right;"><input type="text" value="-25.00"/></p>		
<p>Purpose of Disbursement Prior Period Void (Invalid)</p>	<p><input type="text"/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Rosalind Hill</p>		<p>Transaction ID: 30b-16-08685-08818 Date of Disbursement</p>	
<p>Mailing Address 23 Hawthorne Lane</p>		<p><input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/></p>	
<p>City Newark State NJ Zip Code 07104</p>	<p>Amount of Each Disbursement this Period</p> <p style="text-align: right;"><input type="text" value="-10.00"/></p>		
<p>Purpose of Disbursement Prior Period Void (Invalid)</p>	<p><input type="text"/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) Ray Alcantara</p>		<p>Transaction ID: 30b-22-00161-00179 Date of Disbursement</p>	
<p>Mailing Address 52 Wood Lake Drive</p>		<p><input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/></p>	
<p>City Piscataway State NJ Zip Code 08854</p>	<p>Amount of Each Disbursement this Period</p> <p style="text-align: right;"><input type="text" value="827.55"/></p>		
<p>Purpose of Disbursement Travel Expenses</p>	<p><input type="text"/></p>		
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alaina Arce		Transaction ID: 30b-22-00162-00180 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 437 Donald Street		Amount of Each Disbursement this Period 195.62	
City State Zip Code Brick NJ 08723	Purpose of Disbursement Travel Expenses	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Victor Cirilo		Transaction ID: 30b-22-00163-0000 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 264.28	
City State Zip Code West Orange NJ 07052	Purpose of Disbursement See Memo Items	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: 30b-22-00163-00181 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address PO Box 489		Amount of Each Disbursement this Period 264.28	
City State Zip Code Newark NJ 07101-0489	Purpose of Disbursement Telecommunications Expenses	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

459.90

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Victor Cirilo		Transaction ID: 30b-22-00164-00182 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 95.44
City West Orange State NJ Zip Code 07052	Category/ Type	
Purpose of Disbursement Office Supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Victor Cirilo		Transaction ID: 30b-22-00165-00183 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 90.80
City West Orange State NJ Zip Code 07052	Category/ Type	
Purpose of Disbursement Office Supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Adam P Heiser		Transaction ID: 30b-22-00166-00184 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 173 Pompton Avenue		Amount of Each Disbursement this Period 170.88
City Hawthorne State NJ Zip Code 07506	Category/ Type	
Purpose of Disbursement Office Supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	357.12
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Adam P Heiser		Transaction ID: 30b-22-00167-00185 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 173 Pompton Avenue		Amount of Each Disbursement this Period 148.44	
City Hawthorne State NJ Zip Code 07506	Purpose of Disbursement Office Supplies Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ivette Martinez		Transaction ID: 30b-22-00168-00186 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 538 McBride Avenue		Amount of Each Disbursement this Period 45.17	
City West Patterson State NJ Zip Code 07524	Purpose of Disbursement Office Supplies Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Alfredo Rivera		Transaction ID: 30b-22-00169-00187 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address PO Box 40034		Amount of Each Disbursement this Period 204.72	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Travel Expenses Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	398.33
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Alfredo Rivera		Transaction ID: 30b-22-00170-00188 Date of Disbursement 11 / 15 / 2006	
Mailing Address PO Box 40034		Amount of Each Disbursement this Period 270.94	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Travel Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joseph Shields		Transaction ID: 30b-22-00171-00189 Date of Disbursement 11 / 15 / 2006	
Mailing Address 700 Lower State Road Apt. 904		Amount of Each Disbursement this Period 27.55	
City North Wales State PA Zip Code 19454	Purpose of Disbursement Travel Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James Souder		Transaction ID: 30b-22-00172-00190 Date of Disbursement 11 / 15 / 2006	
Mailing Address 893 Broadway Avenue		Amount of Each Disbursement this Period 162.63	
City Newark State NJ Zip Code 07104	Purpose of Disbursement Travel Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	461.12
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Caitlin J VanOrden		Transaction ID: 30b-22-00173-00191 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1560 Linden Boulevard		Amount of Each Disbursement this Period 264.34
City Vineland State NJ Zip Code 08361	Purpose of Disbursement Travel Expenses	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Caitlin J VanOrden		Transaction ID: 30b-22-00173-00193 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1560 Linden Boulevard		Amount of Each Disbursement this Period 203.98
City Vineland State NJ Zip Code 08361	Purpose of Disbursement Travel Expenses	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Caitlin J VanOrden		Transaction ID: 30b-22-00173-00194 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1560 Linden Boulevard		Amount of Each Disbursement this Period 122.42
City Vineland State NJ Zip Code 08361	Purpose of Disbursement Office Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	590.74
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Public Opinion Research		Transaction ID: 30b-01-03381-05463 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 6315 Sykesville Road		Amount of Each Disbursement this Period 337.50
City Sykesville State MD Zip Code 21784	Purpose of Disbursement Research Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Public Opinion Research		Transaction ID: 30b-01-03381-05464 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 6315 Sykesville Road		Amount of Each Disbursement this Period 168.76
City Sykesville State MD Zip Code 21784	Purpose of Disbursement Research Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Public Opinion Research		Transaction ID: 30b-01-03381-05465 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 6315 Sykesville Road		Amount of Each Disbursement this Period 162.76
City Sykesville State MD Zip Code 21784	Purpose of Disbursement Research Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

669.02

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Public Opinion Research		Transaction ID: 30b-01-03381-05466 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 6315 Sykesville Road		Amount of Each Disbursement this Period 281.25
City Sykesville State MD Zip Code 21784		
Purpose of Disbursement Research Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Commerce Bank - Visa		Transaction ID: 30b-01-03395-0000 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address P.O. Box 2580		Amount of Each Disbursement this Period 209.50
City Cherry Hill State NJ Zip Code 08034		
Purpose of Disbursement See Memo Items Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. House of Blues		Transaction ID: 30b-01-03395-05493 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 801 Boardwalk		Amount of Each Disbursement this Period 209.50 [MEMO ITEM]
City Atlantic City State NJ Zip Code 08401		
Purpose of Disbursement Food & Beverage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	490.75
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. The Barclay		Transaction ID: 30b-22-00175-00195 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 112 Fifth Avenue		Amount of Each Disbursement this Period 14330.00
City Belmar State NJ Zip Code 07719	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LSG Strategies		Transaction ID: 30b-22-00176-00196 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 2120 L Street NW Suite 305		Amount of Each Disbursement this Period 67541.01
City Washington State DC Zip Code 20037	Purpose of Disbursement Research Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. LSG Strategies		Transaction ID: 30b-22-00176-00197 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 2120 L Street NW Suite 305		Amount of Each Disbursement this Period 1301.68
City Washington State DC Zip Code 20037	Purpose of Disbursement Mass Communication Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	83172.69
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Maquet Jefferson		Transaction ID: 30b-21-05049-05049 Date of Disbursement 11 / 17 / 2006
Mailing Address 35 Mary Street Apartment 1E		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07503	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Altimont Hacker		Transaction ID: 30b-21-05050-05050 Date of Disbursement 11 / 17 / 2006
Mailing Address 440 East 26th Apartment 2		Amount of Each Disbursement this Period 75.00
City Paterson State NJ Zip Code 07504	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Karelle Dye		Transaction ID: 30b-21-05054-05054 Date of Disbursement 11 / 17 / 2006
Mailing Address 1420 West Girard Avenue Apt C		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19130	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Aziz Nifeesa		Transaction ID: 30b-21-05055-05055 Date of Disbursement 11 / 17 / 2006
Mailing Address 3412 A Street		Amount of Each Disbursement this Period 200.00
City Philadelphia State PA Zip Code 19134	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Trina Rivers		Transaction ID: 30b-21-05056-05056 Date of Disbursement 11 / 17 / 2006
Mailing Address 3120 North Sheridan		Amount of Each Disbursement this Period 250.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Octavia Smith		Transaction ID: 30b-21-05057-05057 Date of Disbursement 11 / 17 / 2006
Mailing Address 3131 West Montgomery Avenue		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19121	Purpose of Disbursement Field Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1829 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Mimmas Pizza and Resturant		Transaction ID: 30b-22-00179-00200 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6
Mailing Address 216 Hargesell Avenue		Amount of Each Disbursement this Period 428.00
City Maywood State NJ Zip Code 07607	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Arena Resturant Coctail Bar		Transaction ID: 30b-22-00180-00201 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6
Mailing Address 250 Essex Street		Amount of Each Disbursement this Period 500.00
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Food & Beverage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dalandra Epting		Transaction ID: 30b-21-05060-05060 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6
Mailing Address 25 Joyce Kimer Avenue, Apt. 2, P.O		Amount of Each Disbursement this Period 400.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1328.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1830 / 1881

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) A. Bianca Lester		Transaction ID: 30b-21-05061-05061 Date of Disbursement 11 / 22 / 2006	
Mailing Address 21 Euclid Ave.		Amount of Each Disbursement this Period 80.00	
City Hackensack State NJ Zip Code 07601	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Jordan		Transaction ID: 30b-21-05063-05063 Date of Disbursement 11 / 27 / 2006	
Mailing Address 380 Fulton Street		Amount of Each Disbursement this Period 156.00	
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Field Consulting Services Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

236.00

TOTAL This Period (last page this line number only) ►

1662149.66

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Apollo News Service	Nature of Debt (Purpose): Periodicals
Mailing Address PO Box 598	
City State ZIP Code East Brunswick NJ 08816	

Outstanding Balance Beginning This Period 45.45	Transaction ID: 10-000012	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T	Nature of Debt (Purpose): Telecommunications Services
Mailing Address PO Box 2971	
City State ZIP Code Omaha NE 68103-2971	

Outstanding Balance Beginning This Period 1797.94	Transaction ID: 10-000017	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1797.94

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ATX Communications Services, Inc.	Nature of Debt (Purpose): Telecommunications Services
Mailing Address PO Box 57194	
City State ZIP Code Philadelphia PA 19111	

Outstanding Balance Beginning This Period 6603.97	Transaction ID: 10-000018	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6603.97

1) SUBTOTALS This Period This Page (optional).....	8447.36
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Commerce Bank - Visa	Nature of Debt (Purpose): Balance Due - Expenses
Mailing Address P.O. Box 2580	
City State ZIP Code Cherry Hill NJ 08034	

Outstanding Balance Beginning This Period 1000.00	Transaction ID: 10-000024	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Express	Nature of Debt (Purpose): Delivery Services
Mailing Address P.O. Box 1140 Department A	
City State ZIP Code Memphis TN 38101	

Outstanding Balance Beginning This Period 34.96	Transaction ID: 10-000013	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 34.96

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Labels & Lists	Nature of Debt (Purpose): Research Materials
Mailing Address 2500 116th Avenue NE	
City State ZIP Code Bellevue WA 98004	

Outstanding Balance Beginning This Period 9352.22	Transaction ID: 10-000014	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9352.22

1) SUBTOTALS This Period This Page (optional).....	10387.18
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Liberty Insurance Co.	Nature of Debt (Purpose): Insurance
Mailing Address 525 Route 33	
City State ZIP Code Millstone NJ 07726	

Outstanding Balance Beginning This Period <input type="text" value="615.00"/>	Transaction ID: 10-000021	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="615.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LSG Strategies, Inc.	Nature of Debt (Purpose): Voter Identification
Mailing Address 1001 G Street N.W.	
City State ZIP Code Washington DC 20001	

Outstanding Balance Beginning This Period <input type="text" value="10559.48"/>	Transaction ID: 10-000019	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10559.48"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rabinowitz, Trenk, Lubetkin & Tully, PC	Nature of Debt (Purpose): Legal Services
Mailing Address Attorneys at Law 200 Executive Drive, Suite 225	
City State ZIP Code West Orange NJ 07052-3303	

Outstanding Balance Beginning This Period <input type="text" value="92.80"/>	Transaction ID: 10-000015	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="92.80"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="11267.28"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sprint	Nature of Debt (Purpose): Telecommunications Services
Mailing Address PO BoX 740463	
City State ZIP Code Cincinnati OH 45274-0463	

Outstanding Balance Beginning This Period <input type="text" value="381.11"/>	Transaction ID: 10-000022	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="381.11"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor United Parcel Service	Nature of Debt (Purpose): Delivery Services
Mailing Address PO Box 7247-0244	
City State ZIP Code Philadelphia PA 19170-0001	

Outstanding Balance Beginning This Period <input type="text" value="1451.30"/>	Transaction ID: 10-000016	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1451.30"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Telecommunications Services
Mailing Address PO Box 588	
City State ZIP Code Fair Lawn NJ 07410	

Outstanding Balance Beginning This Period <input type="text" value="2097.96"/>	Transaction ID: 10-000023	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2097.96"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="3930.37"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 1835 / 1881
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Xpedite Systems Inc	Nature of Debt (Purpose): Fax Services
Mailing Address P O Box 14024	
City State ZIP Code Newark NJ 07101	

Outstanding Balance Beginning This Period	Transaction ID: 10-000020	
1003.81		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1003.81

1) SUBTOTALS This Period This Page (optional).....	1003.81
2) TOTALS This Period (last page this line number only).....	35036.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New Jersey Democratic State Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee	
If YES, name the designating committee:	Mailing Address	
	City	State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee The Tyson Organization, Inc.		Purpose of Expenditure Research Services	Category/Type
Mailing Address 1000 Macon Street, Suite 300		Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
City Fort Worth	State TX	ZIP Code 76102	
Name of Federal Candidate Supported Linda Stender	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NJ District: 07	Amount 26980.63
Aggregate General Election Expenditure for this Candidate ▶ 26980.63		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: 25-01-03289-05356			

Full Name (Last, First, Middle Initial) of Each Payee The Tyson Organization, Inc.		Purpose of Expenditure Research Services	Category/Type
Mailing Address 1000 Macon Street, Suite 300		Date M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6	
City Fort Worth	State TX	ZIP Code 76102	
Name of Federal Candidate Supported Linda Stender	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NJ District: 07	Amount 15781.60
Aggregate General Election Expenditure for this Candidate ▶ 42762.23		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: 25-01-03313-05391			

SUBTOTAL of Expenditures This Page (optional)	42762.23
TOTAL This Period (last page this line number only)	42762.23

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 187 / 1881

NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

General Fundraising

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

25.00 %

NONFEDERAL %

75.00 %

Transaction ID:
H2-0016

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	15552.45

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	Transaction ID: H318a-01-03208	15552.45
ii) Generic Voter Drive	Transaction ID:	
iii) Exempt Activities	Transaction ID:	
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)	Transaction ID:	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 11 / 17 / 2006	27160.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	27160.00	Transaction ID: H318a-01-03383
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 11 / 17 / 2006	17686.53

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	17686.53	Transaction ID: H318a-01-03400
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	60398.98
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	60398.98

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) O'Sullivan, Kevin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 535 River Road			Allocated Activity or Event Year-To-Date 394639.69		
City Phillipsburg	State NJ	Zip Code 08865	Date <input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Political Consulting Services			Transaction ID: 21a-01-03207-05238		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

B. Full Name (Last, First, Middle Initial) Hasler Financial Services, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 45850			Allocated Activity or Event Year-To-Date 394906.12		
City San Francisco	State CA	Zip Code 94145-0850	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Equipment			Transaction ID: 21a-01-03293-05363		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.95		210.48		266.43

C. Full Name (Last, First, Middle Initial) Hasler Financial Services, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 45850			Allocated Activity or Event Year-To-Date 395172.55		
City San Francisco	State CA	Zip Code 94145-0850	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Equipment			Transaction ID: 21a-01-03293-05364		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.95		210.48		266.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1161.90		4370.96		5532.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Hasler Financial Services, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 45850			Allocated Activity or Event Year-To-Date 395438.98		
City San Francisco	State CA	Zip Code 94145-0850	Date MM / DD / YYYY 11 / 02 / 2006		
Purpose of Disbursement: Office Equipment			Transaction ID: 21a-01-03293-05365		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.95		210.48		266.43

B. Full Name (Last, First, Middle Initial) Cooper Pest Control, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 351 Lawrence Station Road			Allocated Activity or Event Year-To-Date 395600.37		
City Lawrenceville	State NJ	Zip Code 08648	Date MM / DD / YYYY 11 / 02 / 2006		
Purpose of Disbursement: Office Services - Pest Control			Transaction ID: 21a-01-03291-05358		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.89		127.50		161.39

C. Full Name (Last, First, Middle Initial) Cooper Pest Control, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 351 Lawrence Station Road			Allocated Activity or Event Year-To-Date 395763.26		
City Lawrenceville	State NJ	Zip Code 08648	Date MM / DD / YYYY 11 / 02 / 2006		
Purpose of Disbursement: Office Services - Pest Control			Transaction ID: 21a-01-03291-05359		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.21		128.68		162.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
124.05		466.66		590.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Cooper Pest Control, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 351 Lawrence Station Road			Allocated Activity or Event Year-To-Date 395934.18																						
City	State	Zip Code	Category/ Type																						
Lawrenceville	NJ	08648																							
Purpose of Disbursement: Office Services - Pest Control			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	0	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03291-05360																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.89		135.03		170.92

B. Full Name (Last, First, Middle Initial) Commercial Cleaning Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1602 Pennington Road			Allocated Activity or Event Year-To-Date 396601.59																						
City	State	Zip Code	Category/ Type																						
Trenton	NJ	08618																							
Purpose of Disbursement: Office Services - Facilities Maintenance			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	0	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03294-05366																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.16		527.25		667.41

C. Full Name (Last, First, Middle Initial) Commercial Cleaning Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1602 Pennington Road			Allocated Activity or Event Year-To-Date 397285.34																						
City	State	Zip Code	Category/ Type																						
Trenton	NJ	08618																							
Purpose of Disbursement: Office Services - Facilities Maintenance			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	0	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03294-05367																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.59		540.16		683.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
319.64		1202.44		1522.08

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Commercial Cleaning Corporation

Mailing Address
1602 Pennington Road

City	State	Zip Code
Trenton	NJ	08618

Purpose of Disbursement:
Office Services - Facilities Maintenance

Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
397947.14

Date / /
Transaction ID: 21a-01-03294-05368

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.98		522.82		661.80

B. Full Name (Last, First, Middle Initial)
Techmates, Inc.

Mailing Address
575 Route 73 North, Building C-2

City	State	Zip Code
West Berlin	NJ	08091

Purpose of Disbursement:
Office Supplies

Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
398089.15

Date / /
Transaction ID: 21a-01-03295-05369

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.82		112.19		142.01

C. Full Name (Last, First, Middle Initial)
Techmates, Inc.

Mailing Address
575 Route 73 North, Building C-2

City	State	Zip Code
West Berlin	NJ	08091

Purpose of Disbursement:
Office Supplies

Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
398239.00

Date / /
Transaction ID: 21a-01-03295-05370

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.47		118.38		149.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
200.27		753.39		953.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Techmates, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 575 Route 73 North, Building C-2			Allocated Activity or Event Year-To-Date 398335.54																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-03295-05371			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	6																
West Berlin	NJ	08091																							
Purpose of Disbursement: Office Supplies			Category/ Type																						
Activity or Event Identifier: Admin 05/06																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.27		76.27		96.54

B. Full Name (Last, First, Middle Initial) Techmates, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 575 Route 73 North, Building C-2			Allocated Activity or Event Year-To-Date 398532.30																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-03295-05372			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	6																
West Berlin	NJ	08091																							
Purpose of Disbursement: Office Supplies			Category/ Type																						
Activity or Event Identifier: Admin 05/06																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.32		155.44		196.76

C. Full Name (Last, First, Middle Initial) Techmates, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 575 Route 73 North, Building C-2			Allocated Activity or Event Year-To-Date 398575.09																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-03295-05373			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	6																
West Berlin	NJ	08091																							
Purpose of Disbursement: Office Supplies			Category/ Type																						
Activity or Event Identifier: Admin 05/06																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.99		33.80		42.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.58		265.51		336.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Metropolitan Telecommunications
Mailing Address
PO Box 9660
City Manchester **State** NH **Zip Code** 03108-9660
Purpose of Disbursement:
Telecommunications Services
Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
400494.95
Date 11 / 02 / 2006
Transaction ID: 21a-01-03296-05374

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
403.17		1516.69		1919.86

B. Full Name (Last, First, Middle Initial)
PSE&G
Mailing Address
PO Box 14105
City New Brunswick **State** NJ **Zip Code** 08906-4105
Purpose of Disbursement:
Utilities
Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
400602.39
Date 11 / 02 / 2006
Transaction ID: 21a-01-03298-05376

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.56		84.88		107.44

C. Full Name (Last, First, Middle Initial)
PSE&G
Mailing Address
PO Box 14104
City New Brunswick **State** NJ **Zip Code** 08906-4104
Purpose of Disbursement:
Utilities
Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
401134.25
Date 11 / 02 / 2006
Transaction ID: 21a-01-03299-05377

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
111.69		420.17		531.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
537.42		2021.74		2559.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
PSE&G

Mailing Address
PO Box 14104

City State Zip Code
New Brunswick NJ 08906-4104

Purpose of Disbursement:
Utilities

Category/
Type

Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402072.67

Date 11 / 02 / 2006

Transaction ID: 21a-01-03300-05378

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.07		741.35		938.42

B. Full Name (Last, First, Middle Initial)
CNA Insurance

Mailing Address
PO Box 382033

City State Zip Code
Pittsburgh PA 15250-8033

Purpose of Disbursement:
Insurance

Category/
Type

Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

405247.46

Date 11 / 02 / 2006

Transaction ID: 21a-01-03301-05379

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
666.71		2508.08		3174.79

C. Full Name (Last, First, Middle Initial)
O'Sullivan, Kevin

Mailing Address
535 River Road

City State Zip Code
Phillipsburg NJ 08865

Purpose of Disbursement:
Political Consulting Services

Category/
Type

Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

410247.46

Date 11 / 06 / 2006

Transaction ID: 21a-01-03311-05389

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1913.78		7199.43		9113.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Common Sense Consulting			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 222 Stony Brook Road			Allocated Activity or Event Year-To-Date 418247.46	
City	State	Zip Code	Category/ Type	
Hopewell	NJ	08525		
Purpose of Disbursement: Compliance Consulting Services			Date M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6	
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03312-05390	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1680.00		6320.00		8000.00

B. Full Name (Last, First, Middle Initial) Blue State Technologies			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 352 Ford Avenue			Allocated Activity or Event Year-To-Date 424247.46	
City	State	Zip Code	Category/ Type	
Fords	NJ	08863		
Purpose of Disbursement: IT Consulting Services			Date M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6	
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03380-05462	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1260.00		4740.00		6000.00

C. Full Name (Last, First, Middle Initial) Belmont and Crystal Springs			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4170 Tanners Creek Drive			Allocated Activity or Event Year-To-Date 424348.91	
City	State	Zip Code	Category/ Type	
Flowery Branch	GA	30542		
Purpose of Disbursement: Office Services - Water			Date M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6	
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03384-05474	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.30		80.15		101.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2961.30		11140.15		14101.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) The CIT Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Attn: Customer Service P.O. Box 550599			Allocated Activity or Event Year-To-Date 425635.23		
City	State	Zip Code	Category/ Type		
Jacksonville	FL	32255-0599			
Purpose of Disbursement: Office Equipment			Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03385-05475		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
270.13		1016.19		1286.32

B. Full Name (Last, First, Middle Initial) Hasler Financial Services, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 45850			Allocated Activity or Event Year-To-Date 425901.66		
City	State	Zip Code	Category/ Type		
San Francisco	CA	94145-0850			
Purpose of Disbursement: Office Equipment			Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03386-05476		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.95		210.48		266.43

C. Full Name (Last, First, Middle Initial) J.W. Kennedy, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 536 Perry Street			Allocated Activity or Event Year-To-Date 426008.31		
City	State	Zip Code	Category/ Type		
Trenton	NJ	08618			
Purpose of Disbursement: Facility Maintenance			Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-03387-05479		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.40		84.25		106.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
348.48		1310.92		1659.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Princeton Air			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4060			Allocated Activity or Event Year-To-Date 426412.17		
City Princeton	State NJ	Zip Code 08543	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Services - HVAC			Transaction ID: 21a-01-03388-05480		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.81		319.05		403.86

B. Full Name (Last, First, Middle Initial) Princeton Air			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4060			Allocated Activity or Event Year-To-Date 426819.84		
City Princeton	State NJ	Zip Code 08543	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Services - HVAC			Transaction ID: 21a-01-03388-05481		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.61		322.06		407.67

C. Full Name (Last, First, Middle Initial) Princeton Air			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4060			Allocated Activity or Event Year-To-Date 427227.51		
City Princeton	State NJ	Zip Code 08543	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Services - HVAC			Transaction ID: 21a-01-03388-05482		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.61		322.06		407.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.03		963.17		1219.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Princeton Air			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4060			Allocated Activity or Event Year-To-Date 427635.18		
City Princeton	State NJ	Zip Code 08543	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Services - HVAC			Transaction ID: 21a-01-03388-05483		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.61		322.06		407.67

B. Full Name (Last, First, Middle Initial) Princeton Air			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4060			Allocated Activity or Event Year-To-Date 428042.85		
City Princeton	State NJ	Zip Code 08543	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Services - HVAC			Transaction ID: 21a-01-03388-05484		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.61		322.06		407.67

C. Full Name (Last, First, Middle Initial) Supreme Security Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1565 Union Avenue			Allocated Activity or Event Year-To-Date 428354.29		
City Union	State NJ	Zip Code 07083	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Services - Security			Transaction ID: 21a-01-03389-05485		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.40		246.04		311.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
236.62		890.16		1126.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Verizon Wireless
Mailing Address
PO Box 489
City Newark **State** NJ **Zip Code** 07101-0489
Purpose of Disbursement:
Telecommunications Services
Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
429983.30
Date 11 / 17 / 2006
Transaction ID: 21a-01-03393-05489

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.30		31.20		39.50

B. Full Name (Last, First, Middle Initial)
Verizon Wireless
Mailing Address
PO Box 17464
City Baltimore **State** MD **Zip Code** 21297
Purpose of Disbursement:
Telecommunications Services
Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
430646.17
Date 11 / 17 / 2006
Transaction ID: 21a-01-03394-05490

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
139.20		523.67		662.87

C. Full Name (Last, First, Middle Initial)
Commerce Bank - Visa
Mailing Address
P.O. Box 2580
City Cherry Hill **State** NJ **Zip Code** 08034
Purpose of Disbursement:
See Memo Items
Activity or Event Identifier:
Admin 05/06

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
432772.44
Date 11 / 17 / 2006
Transaction ID: 21a-01-03395-0013

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
446.52		1679.75		2126.27

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
594.02		2234.62		2828.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Hess			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1672 Route 88			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;">0.00</div>	
City Brick	State NJ	Zip Code 08724	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 17 / 2006</div>	
Purpose of Disbursement: Travel Expenses				
Activity or Event Identifier: Admin 05/06 [MEMO ITEM]			Transaction ID: 21a-01-03395-05491	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.19		30.81		39.00

B. Full Name (Last, First, Middle Initial) Hess			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1672 Route 88			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;">0.00</div>	
City Brick	State NJ	Zip Code 08724	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 17 / 2006</div>	
Purpose of Disbursement: Travel Expenses				
Activity or Event Identifier: Admin 05/06 [MEMO ITEM]			Transaction ID: 21a-01-03395-05492	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.64		32.50		41.14

C. Full Name (Last, First, Middle Initial) House of Blues			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 801 Boardwalk			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;">0.00</div>	
City Atlantic City	State NJ	Zip Code 08401	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 17 / 2006</div>	
Purpose of Disbursement: Food & Beverage				
Activity or Event Identifier: Admin 05/06 [MEMO ITEM]			Transaction ID: 21a-01-03395-05494	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.28		764.72		968.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Hasler Mailing Systems, Inc.

Mailing Address
PO Box 895

City State Zip Code
Shelton CT 06484-0895

Purpose of Disbursement:
Postage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03395-05495

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
216.30		813.70		1030.00

B. Full Name (Last, First, Middle Initial)
Circuit City

Mailing Address
3350 US Highway 1

City State Zip Code
Lawrenceville NJ 08648

Purpose of Disbursement:
Service Charge

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03395-05496

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.11		38.02		48.13

C. Full Name (Last, First, Middle Initial)
Commerce Bank - Visa

Mailing Address
P.O. Box 2580

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement:
See Memo Items

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

433844.43

Activity or Event Identifier:
Admin 05/06

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-0013

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
225.12		846.87		1071.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
225.12		846.87		1071.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Marsilio's

Mailing Address
541 Roebling Avenue

City State Zip Code
Trenton NJ 08611

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05497

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.72		175.76		222.48

B. Full Name (Last, First, Middle Initial)
Marsilio's

Mailing Address
541 Roebling Avenue

City State Zip Code
Trenton NJ 08611

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05498

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.71		74.15		93.86

C. Full Name (Last, First, Middle Initial)
Hilton East Brunswick

Mailing Address
3 Tower Center Boulevard

City State Zip Code
East Brunswick NJ 08816

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05499

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.31		12.46		15.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
La Dolce Vita

Mailing Address
400 Ocean Street

City State Zip Code
Belmar NJ 07719

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05500

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.55		43.45		55.00

B. Full Name (Last, First, Middle Initial)
Knife and Fork

Mailing Address
2405 Atlantic Avenue

City State Zip Code
Atlantic City NJ 08401

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05501

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.86		59.64		75.50

C. Full Name (Last, First, Middle Initial)
Marsilio's

Mailing Address
541 Roebling Avenue

City State Zip Code
Trenton NJ 08611

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05502

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.85		25.79		32.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
La Fontana Italian Restaurant

Mailing Address
120 Albany Street

City State Zip Code
New Brunswick NJ 08901

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05503

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
35.07 + 131.93 = 167.00

B. Full Name (Last, First, Middle Initial)
Girasole Ristorante

Mailing Address
3108 Pacific Avenue

City State Zip Code
Atlantic City NJ 08401

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05504

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
15.73 + 59.17 = 74.90

C. Full Name (Last, First, Middle Initial)
Girasole Ristorante

Mailing Address
3108 Pacific Avenue

City State Zip Code
Atlantic City NJ 08401

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05505

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
23.96 + 90.12 = 114.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
40/40 Club

Mailing Address
2120 Atlantic Avenue

City State Zip Code
Atlantic City NJ 08401

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05506

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.64		17.46		22.10

B. Full Name (Last, First, Middle Initial)
Tropicana Casino & Resort

Mailing Address
Brighton Ave & Boardwalk

City State Zip Code
Atlantic City NJ 08401

Purpose of Disbursement:
Travel Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03396-05507

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.72		156.94		198.66

C. Full Name (Last, First, Middle Initial)
Commerce Bank - Visa

Mailing Address
P.O. Box 2580

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement:
See Memo Items

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

434000.37

Activity or Event Identifier:
Admin 05/06

Date 11 / 17 / 2006

Transaction ID: 21a-01-03397-0013

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.75		123.19		155.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.75		123.19		155.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Dependable Limousine			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Highway 33			Allocated Activity or Event Year-To-Date 0.00		
City Freehold	State NJ	Zip Code 07728	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Travel Expenses			Transaction ID: 21a-01-03397-05509		
Activity or Event Identifier: Admin 05/06 [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="31.29"/>		<input type="text" value="117.71"/>		<input type="text" value="149.00"/>

B. Full Name (Last, First, Middle Initial) Commerce Bank, N.A. - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 0.00		
City Cherry Hill	State NJ	Zip Code 08034	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Service Charge			Transaction ID: 21a-01-03397-05510		
Activity or Event Identifier: Admin 05/06 [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1.46"/>		<input type="text" value="5.48"/>		<input type="text" value="6.94"/>

C. Full Name (Last, First, Middle Initial) Commerce Bank - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 434026.93		
City Cherry Hill	State NJ	Zip Code 08034	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: See Memo Items			Transaction ID: 21a-01-03398-0013		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="5.58"/>		<input type="text" value="20.98"/>		<input type="text" value="26.56"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="5.58"/>		<input type="text" value="20.98"/>		<input type="text" value="26.56"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) Commerce Bank, N.A. - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Cherry Hill	NJ	08034		
Purpose of Disbursement: Service Charge			Date M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6 Transaction ID: 21a-01-03398-05511	
Activity or Event Identifier: Admin 05/06 [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100%; text-align: center;">5.58</div>		<div style="border: 1px solid black; width: 100%; text-align: center;">20.98</div>		<div style="border: 1px solid black; width: 100%; text-align: center;">26.56</div>

B. Full Name (Last, First, Middle Initial) Commerce Bank, N.A. - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">434229.21</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Cherry Hill	NJ	08034		
Purpose of Disbursement: See Memo Items			Date M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6 Transaction ID: 21a-01-03399-0013	
Activity or Event Identifier: Admin 05/06				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100%; text-align: center;">42.48</div>		<div style="border: 1px solid black; width: 100%; text-align: center;">159.80</div>		<div style="border: 1px solid black; width: 100%; text-align: center;">202.28</div>

C. Full Name (Last, First, Middle Initial) Sub Maria's Deli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 17 East Park Ave			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Hamilton	NJ	08610		
Purpose of Disbursement: Food & Beverage			Date M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6 Transaction ID: 21a-01-03399-05512	
Activity or Event Identifier: Admin 05/06 [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100%; text-align: center;">16.51</div>		<div style="border: 1px solid black; width: 100%; text-align: center;">62.12</div>		<div style="border: 1px solid black; width: 100%; text-align: center;">78.63</div>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100%; text-align: center;">42.48</div>		<div style="border: 1px solid black; width: 100%; text-align: center;">159.80</div>		<div style="border: 1px solid black; width: 100%; text-align: center;">202.28</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Sub Maria's Deli

Mailing Address
17 East Park Ave

City State Zip Code
Hamilton NJ 08610

Purpose of Disbursement:
Food & Beverage

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03399-05513

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.53		73.49		93.02

B. Full Name (Last, First, Middle Initial)
Commerce Bank, N.A. - Visa

Mailing Address
P.O. Box 2580

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement:
Service Charge

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Admin 05/06

[MEMO ITEM]

Date 11 / 17 / 2006

Transaction ID: 21a-01-03399-05514

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.43		24.20		30.63

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 53852

City State Zip Code
Phoenix AZ 85072

Purpose of Disbursement:
Credit Card Processing Fees

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

112725.67

Activity or Event Identifier:
General Fundraising

Date 10 / 31 / 2006

Transaction ID: 21a-01-03404-05519

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.67		224.02		298.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.67		224.02		298.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 53852			Allocated Activity or Event Year-To-Date 112730.17		
City Phoenix	State AZ	Zip Code 85072	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: Credit Card Processing Fees			Transaction ID: 21a-01-03405-05520		
Activity or Event Identifier: General Fundraising					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1.13"/>		<input type="text" value="3.37"/>		<input type="text" value="4.50"/>

B. Full Name (Last, First, Middle Initial) E-OnlineData			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5 Milk Street			Allocated Activity or Event Year-To-Date 112765.17		
City Portland	State ME	Zip Code 04101	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: Credit Card Processing Fees			Transaction ID: 21a-01-03406-05521		
Activity or Event Identifier: General Fundraising					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="8.75"/>		<input type="text" value="26.25"/>		<input type="text" value="35.00"/>

C. Full Name (Last, First, Middle Initial) Nova Information Systems			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7300 Chapman Highway			Allocated Activity or Event Year-To-Date 112781.17		
City Knoxville	State TN	Zip Code 37920	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: Credit Card Processing Fees			Transaction ID: 21a-01-03407-05522		
Activity or Event Identifier: General Fundraising					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4.00"/>		<input type="text" value="12.00"/>		<input type="text" value="16.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="13.88"/>		<input type="text" value="41.62"/>		<input type="text" value="55.50"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 53852			Allocated Activity or Event Year-To-Date 112877.85	
City Phoenix	State AZ	Zip Code 85072	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: Credit Card Processing Fees			Transaction ID: 21a-01-03425-05540	
Activity or Event Identifier: General Fundraising				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.17		72.51		96.68

B. Full Name (Last, First, Middle Initial) Kelly Maer			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 307 West Mount Vernon Avenue			Allocated Activity or Event Year-To-Date 119877.85	
City Haddonfield	State NJ	Zip Code 08033	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: Fundraising Consulting Services			Transaction ID: 21a-01-03290-05357	
Activity or Event Identifier: General Fundraising				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1750.00		5250.00		7000.00

C. Full Name (Last, First, Middle Initial) E-OnlineData			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5 Milk Street			Allocated Activity or Event Year-To-Date 119912.85	
City Portland	State ME	Zip Code 04101	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: Credit Card Processing Fees			Transaction ID: 21a-01-03427-05542	
Activity or Event Identifier: General Fundraising				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.75		26.25		35.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1782.92		5348.76		7131.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)
Mantz Advisory Group, LLC

Mailing Address
10709 Great Arbor Drive

City State Zip Code
Potomac MD 20854

Purpose of Disbursement:
Fundraising Consulting Services

Activity or Event Identifier:
General Fundraising

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

133537.85

Date / /

Transaction ID: 21a-22-00178-00199

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3406.25		10218.75		13625.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3406.25		10218.75		13625.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
14641.53	51058.86	65700.39

Image# 27930381866

Form/Schedule: **SA12** Credit Card Program Proceedes
Transaction ID: **12-01-03213-05244**

Form/Schedule: **SB30b** Exempt Activity
Transaction ID: **30b-16-08495-08612**

Image# 27930381867

Form/Schedule: **SB30b** Exempt Activity
Transaction ID: **30b-16-08497-08614**

Form/Schedule: **SB30b** Mileage/Gas
Transaction ID: **30b-16-08505-08625**

Image# 27930381868

Form/Schedule: **SB30b** Mileage/Gas
Transaction ID: **30b-16-08507-08630**

Form/Schedule: **SB30b** Meeting Materials
Transaction ID: **30b-16-08509-08632**

Image# 27930381869

Form/Schedule: **SB30b** Apparel
Transaction ID: **30b-16-08531-08661**

Form/Schedule: **SB30b** GOTV Lists
Transaction ID: **30b-16-08571-08701**

Image# 27930381870

Form/Schedule: **SB30b** GOTV Robo Calls
Transaction ID: **30b-16-08574-08704**

Form/Schedule: **SB30b** None of the underlying transactions require itemization.
Transaction ID: **30b-16-08599-08730**

Image# 27930381871

Form/Schedule: **SB30b** Yard Signs

Transaction ID: **30b-16-08610-08741**

Form/Schedule: **SB30b** The underlying transaction is being investigated by Bank of America and the committee anticipates a full refun-

Transaction ID: **30b-16-08701-08834**

Image# 27930381872

Form/Schedule: **SB30b** The underlying transaction is being investigated by Bank of America and the committee anticipates a full refund.
Transaction ID: **30b-16-08702-08835**

Form/Schedule: **SB30b** The underlying transaction is being investigated by Bank of America and the committee anticipates a full refund.
Transaction ID: **30b-16-08703-08836**

Image# 27930381873

Form/Schedule: **SB30b** The underlying transaction is being investigated by Bank of America and the committee anticipates a full refund.
Transaction ID: **30b-16-08704-08837**

Form/Schedule: **SB30b** Audio vendor payment not reimbursement.
Transaction ID: **30b-22-00051-00051**

Image# 27930381874

Form/Schedule: **SB30b** Audio vendor payment not reimbursement.
Transaction ID: **30b-22-00057-00059**

Form/Schedule: **SB30b** Musical Talent
Transaction ID: **30b-22-00068-00070**

Image# 27930381875

Form/Schedule: **SB30b** Mileage
Transaction ID: **30b-22-00161-00179**

Form/Schedule: **SB30b** None of the underlying transactions require itemization.
Transaction ID: **30b-22-00166-00184**

Image# 27930381876

Form/Schedule: **SB30b** None of the underlying transactions require itemization.

Transaction ID: **30b-22-00167-00185**

Form/Schedule: **SB30b** Mileage/Tolls

Transaction ID: **30b-22-00169-00187**

Image# 27930381877

Form/Schedule: **SB30b** Mileage/Tolls
Transaction ID: **30b-22-00170-00188**

Form/Schedule: **SB30b** Mileage
Transaction ID: **30b-22-00173-00191**

Image# 27930381878

Form/Schedule: **SB30b** Mileage
Transaction ID: **30b-22-00173-00193**

Form/Schedule: **SB30b** Rally Robo Calls
Transaction ID: **30b-22-00176-00197**

Image# 27930381879

Form/Schedule: **H3**

Transaction ID: **H318a-01-03208**

Form/Schedule: **H3**

Transaction ID: **H318a-01-03383**

Form/Schedule: F3XA
Transaction ID:

New Jersey Democratic State Committee (C00104471) - Amended 30-Day Post-General Report (10/19/2006-11/27/2006) Amendment Notes - This text record seeks to clarify issues raised by the Federal Election Commission (FEC) in its February 23, 2007 request for information related to the New Jersey Democratic State Committee's (C0010447-1) Amended 30-Day Post-General Report (10/19/2006-11/27/2006). Note 1 - Schedule E – Independent Expenditure - The committee incorrectly reported a coordinated expenditure on Schedule E. The transaction, which represents a 2USC441a(d) disbursement, has been moved to Schedule F of the amendment. Note 2 - Schedule B, Line 30(b) – Prior Period Voids - The committee reported a number of prior period voids on its post-general report. The subject transactions were cancelled because the payment was determined to be invalid either because the payee did not render services related to the payment or the committee's obligation was satisfied by a subsequent payment(s). Note 3 - Schedule B, Line 30(b) – Prior Period Voids - As noted above, the committee reported a number of prior period voids on its post-general report. The subject transactions were cancelled because the payment was determined to be invalid. The transactions do not represent the acceptance of a prohibited in-kind contribution. Note 4 - Schedule B, Line 30(b) – Missing Addresses - The committee has amended transactions for missing information where possible. Note 5 - Schedule B, Line 30(b) – Purpose Clarification - For those transactions with an identified purpose of Entertainment Expense, Equipment Rental, Field Supplies, Mass Communication Services or Voter Contact Services, the committee has appended each transaction to disclose clarifying information. For transactions with a purpose of Field Services or Field Consulting Services, the identified purpose is used to describe payments made for political consulting services that involve field/canvassing activities. Note 6 - Schedule B, Line 30(b) – Fraudulent Account Activity - The committee's report discloses disbursements to the Bank of America for Fraudulent Account Activity. The transactions relate to counterfeit checks that were submitted to the committee's bank for payment. The bank contacted the committee to confirm the validity of the checks. The committee determined that the checks were not legitimate and advised the bank that the checks should not be honored. The committee worked with the bank to cancel an unauthorized series of checks and closed the affected bank account. The bank's loss protection department communicated with local authorities regarding the matter. The committee is working with its bank to recover funds that were illegitimately transacted. Note 7 - Schedule B – Public Communications - None of the transactions identified with the purposes of Mass Communication Services, Postage, Printing Services, Telecommunications Expenses, or Telecommunications Services requires further attribution. For those transactions with an identified purpose of Mass Communication Services, Postage or Printing Services, the committee has appended each transaction to disclose clarifying information. For transactions with a purpose of Telecommunications Expenses or Telecommunications Services, please be informed that the committee uses these terms as a description for telephone services including long distance, cellular, conference calling, fax services and telephone systems. No disbursement identified as Telecommunications Expenses or Telecommunications Services was for the purpose of public communications.

Form/Schedule: **F3XA**

Transaction ID:

Note 8 - Schedule B - Candidate-Specific Event Expenses - None of the committee's disbursements for Equipment Rental, Fundraising Consulting Fees, Room Rental, Site Rental or Space Rental was made on behalf of any specifically identified federal candidate. Note 9 - Schedule B - Expense Memos - The committee has appended transactions to disclose underlying transactions as required. Note 10 - Schedule B - Travel Expense Memos - The committee has appended transactions to disclose underlying transactions as required. Note 11 - Schedule H4 - Insurance - The committee's disbursement for Insurance represents a payment for non-employee-specific insurance. The subject insurance does not represent a fringe benefit to the committee's employees. Note 12 - Schedule H4 - Fundraising & Political Consulting Services - None of the payees receiving payments for Fundraising Consulting Services or Political Consulting Services is an employee of the committee. Note 13 - Schedule H4 - Fundraising Consulting Services - None of the committee's disbursements for Fundraising Consulting Services was made on behalf of specifically identified federal candidates. Note 14 - Schedule E - Independent Expenditure, Election Designation - As noted above, the committee incorrectly reported a coordinated expenditure on Schedule E. The transaction has been moved to Schedule F of the amendment. An amended Schedule E is unnecessary. Note 15 - Schedule E - Independent Expenditure - As noted above, the committee incorrectly reported a coordinated expenditure on Schedule E. The transaction has been moved to Schedule F of the amendment. A statement attesting to the independence of the expenditure is unnecessary.