

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

2017 OCT 13 AM 11:04

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

BELL FOR SENATE

ADDRESS (number and street)

PO BOX 31

Check if different  
than previously  
reported. (ACC)

PALISADES PARK

NJ

07650

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00558122

3. IS THIS  
REPORT

NEW  
(N) OR

AMENDED  
(A)

STATE ▼ DISTRICT

NJ

00

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y  
2016

through

M M /

D D /

Y Y Y Y  
2016

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

Thomas Datwyler

Signature of Treasurer

*Thomas Datwyler*

Date

M M /

D D /

Y Y Y Y  
2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only

201710130200267002

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name  
**BELL FOR SENATE**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	0.00	566349.88
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	0.00	566149.88
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	1514.00	511383.76
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	1514.00	511383.76
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	74.60	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	13366.63	

**For further information contact:**

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

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

201710130200267003

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name  
**BELL FOR SENATE**

Report Covering the Period: From: 

M	M
10	

 / 

D	D
01	

 / 

Y	Y	Y	Y	Y	Y
2	0	1	6		

 To: 

M	M
12	

 / 

D	D
31	

 / 

Y	Y	Y	Y	Y	Y
2	0	1	6		

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	0.00	418104.93
(i) Itemized (use Schedule A)...	0.00	83019.95
(ii) Unitemized .....	0.00	501124.88
(ii) TOTAL of contributions from individuals .	0.00	0.00
(b) Political Party Committees...	0.00	65225.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) The Candidate .....	0.00	566349.88
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	0.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate...	1500.00	35000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	1500.00	35000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ...</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.08
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b>	1500.00	601349.96

201710130200287004

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 17

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES...

1514.00

511383.76

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES ..

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

35000.00

(b) Of All Other Loans .....

0.00

0.00

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b))...

0.00

35000.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees ...

0.00

200.00

(b) Political Party Committees...

0.00

0.00

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

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS  
(add Lines 20(a), (b), and (c))...

0.00

200.00

21. OTHER DISBURSEMENTS ..

0.00

0.00

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ▶

1514.00

546583.76

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...

88.60

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...

1500.00

25. SUBTOTAL (add Line 23 and Line 24)...

1588.60

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...

1514.00

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD  
(subtract Line 26 from Line 25)...

74.60

201710130200287005

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

LINE NUMBER: PAGE 5 OF 17

Use separate schedule(s) (check only one) for each category on the Detailed Summary Page

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

Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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)  
**BELL FOR SENATE**

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

Mailing Address 132 CHRISTIE ST

City LEONIA State NJ Zip Code 07605

FEC ID number of contributing federal political committee. **C** S8NJ00012

Name of Employer Bell for Senate Occupation Candidate

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
 /550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2016

Transaction ID : SA13A.9149

Amount of Each Receipt this Period  
 500.00

Memo Item  
 Candidate Loan

**B.** Full Name (Last, First, Middle Initial)  
**BELL, JEFFREY, . .**

Mailing Address 132 CHRISTIE ST

City LEONIA State NJ Zip Code 07605

FEC ID number of contributing federal political committee. **C** S8NJ00012

Name of Employer Bell for Senate Occupation Candidate

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
 8550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2016

Transaction ID : SA13A.9158

Amount of Each Receipt this Period  
 1000.00

Memo Item  
 Candidate Loan

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1500.00

**TOTAL** This Period (last page this line number only) ..... ▶ 1500.00

201710130200267006

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 17	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

**A. Capital One**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address PO Box 71083

City Charlotte State NC Zip Code 28272

Purpose of Disbursement  
Credit Card Payment  009

Candidate Name  
**BELL FOR SENATE**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: NJ District: 00

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C00558122

Amount of Each Disbursement this Period: 370.00

Transaction ID : SB17.9153

Memo Item

**B. Capital One**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address PO Box 71083

City Charlotte State NC Zip Code 28272

Purpose of Disbursement  
Credit Card Payment  009

Candidate Name  
**BELL FOR SENATE**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: NJ District: 00

Date of Disbursement: 11 / 21 / 2016

FEC Identification Number: C00558122

Amount of Each Disbursement this Period: 766.00

Transaction ID : SB17.9157

Memo Item

**c. Chase**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address PO Box 15123

City Wilmington State DE Zip Code 19850

Purpose of Disbursement  
Credit Card Payment  009

Candidate Name  
**BELL FOR SENATE**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: NJ District: 00

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C00558122

Amount of Each Disbursement this Period: 161.00

Transaction ID : SB17.9152

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)... 1297.00

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

201710130200287007

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 7 OF 17	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

**A. Chase**

Full Name (Last, First, Middle Initial)  
Chase

Date of Disbursement  
MM / DD / YYYY  
11 / 21 / 2016

Mailing Address PO Box 15123

City Wilmington State DE Zip Code 19850

Purpose of Disbursement  
Credit Card Payment

FEC Identification Number  
C00558122

Amount of Each Disbursement this Period  
172.00

Transaction ID : SB17.9156

Memo Item

Candidate Name  
**BELL FOR SENATE**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

State: NJ District: 00

Category/Type  
009

**B. Wells Fargo**

Full Name (Last, First, Middle Initial)  
Wells Fargo

Date of Disbursement  
MM / DD / YYYY  
10 / 31 / 2016

Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Bank Fees

FEC Identification Number  
C00558122

Amount of Each Disbursement this Period  
14.00

Transaction ID : SB17.9150

Memo Item

Candidate Name  
**BELL FOR SENATE**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

State: NJ District: 00

Category/Type  
001

**c. Wells Fargo**

Full Name (Last, First, Middle Initial)  
Wells Fargo

Date of Disbursement  
MM / DD / YYYY  
11 / 08 / 2016

Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Bank Fees

FEC Identification Number  
C00558122

Amount of Each Disbursement this Period  
3.00

Transaction ID : SB17.9151

Memo Item

Candidate Name  
**BELL FOR SENATE**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

State: NJ District: 00

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional) ... 189.00

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

201710130200287006

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

**A. Wells Fargo**

Full Name (Last, First, Middle Initial)

Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement Bank Fees Category/Type 001

Candidate Name **BELL FOR SENATE**

Office Sought:  House  Senate  President Disbursement For: 2014  Primary  General  Other (specify) ▼

State: NJ District: 00

Date of Disbursement 11 / 30 / 2016

FEC Identification Number C00558122

Amount of Each Disbursement this Period 14.00

Transaction ID : SB17.9154

Memo Item

**B. Wells Fargo**

Full Name (Last, First, Middle Initial)

Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement Bank Fees Category/Type 001

Candidate Name **BELL FOR SENATE**

Office Sought:  House  Senate  President Disbursement For: 2014  Primary  General  Other (specify) ▼

State: NJ District: 00

Date of Disbursement 12 / 30 / 2016

FEC Identification Number C00558122

Amount of Each Disbursement this Period 14.00

Transaction ID : SB17.9155

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

28.00

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

1514.00

201710130260287009



**SCHEDULE C (FEC Form 3)**  
**LOANS**

Transaction ID : SC/10.8296  
NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item Election: 2014  
**BELL, JEFFREY,**  Primary  
 General  
 Other (specify) ▼  
Mailing Address  
132 CHRISTIE ST  
City State ZIP Code  
**LEONIA NJ 07605**  Personal Funds of the Candidate

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

**TERMS** Date Incurred Date Due Interest Rate (If none, enter 0) Secured:  
 /  /   /  /   % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)...   
**TOTALS** This Period (last page in this line only) ...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201710130200287010

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **BELL FOR SENATE** Transaction ID : **SC/10.9121**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item Election: 2014

**BELL, JEFFREY,**  Primary

Mailing Address **132 CHRISTIE ST**  General

Other (specify) ▼

City **LEONIA** State **NJ** ZIP Code **07605**  Personal Funds of the Candidate

Original Amount of Loan **500.00** Cumulative Payment To Date **0.00** Balance Outstanding at Close of This Period **500.00**

**TERMS** Date Incurred **04/12/2016** Date Due **12/31/2016** Interest Rate (If none, enter 0) **0.00** % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)... **500.00**

**TOTALS** This Period (last page in this line only)...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201710130200287011

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **BELL FOR SENATE** Transaction ID : **SC/10.9119**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item Election: 2014  
**BELL, JEFFREY,**  Primary  
 General  
 Other (specify) ▼  
Mailing Address  
132 CHRISTIE ST  
City State ZIP Code  
**LEONIA NJ 07605**  Personal Funds of the Candidate

Original Amount of Loan **1100.00** Cumulative Payment To Date **0.00** Balance Outstanding at Close of This Period **1100.00**

**TERMS** Date Incurred **05<sup>M</sup> / 24<sup>D</sup> / 2016<sup>Y</sup>** Date Due **12/31/2016<sup>Y</sup>** Interest Rate (If none, enter 0) **0.00** % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <b>0.00</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <b>0.00</b>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <b>0.00</b>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <b>0.00</b>

**SUBTOTALS** This Period This Page (optional)... **1100.00**  
**TOTALS** This Period (last page in this line only)...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201710130200287012

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.9137

**BELL FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2014

Primary  
 General  
 Other (specify) ▼

**BELL, JEFFREY,**

Mailing Address  
132 CHRISTIE ST

City  
LEONIA

State  
NJ

ZIP Code  
07605

Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

600.00

0.00

600.00

TERMS

Date Incurred

Date Due

Interest Rate (if none, enter 0)

Secured:

M 08 M /

D 10 D /

Y 2016 Y

M M /

D D /

Y 12/31/2016 Y

0.00 % (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)...

→

600.00

**TOTALS** This Period (last page in this line only) ..

→

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201710130200287013

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

Transaction ID : SC/10.9138

LOAN SOURCE Full Name (Last, First, Middle Initial)

**BELL, JEFFREY,**

Memo Item

Election: 2014

Primary

General

Other (specify) ▼

Mailing Address  
132 CHRISTIE ST

City  
LEONIA

State  
NJ

ZIP Code  
07605

Personal Funds of the Candidate

Original Amount of Loan

600.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

600.00

TERMS

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 09<sup>M</sup> /

D 06<sup>D</sup> /

Y 2016 Y

M M /

D D /

Y 12/31/2016 Y

0.00 % (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)...

.. ▶

600.00

**TOTALS** This Period (last page in this line only) ..

.. ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201710130200287014

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

Transaction ID : **SC/10.9149**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**BELL, JEFFREY,**

Memo Item

Election: 2014

Primary

General

Other (specify) ▼

Mailing Address  
132 CHRISTIE ST

City  
LEONIA

State  
NJ

ZIP Code  
07605

Personal Funds of the Candidate

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

TERMS

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 10<sup>M</sup> / D 11<sup>D</sup> / Y 2016 Y

M M / D D / Y 12/31/2016 Y

0.00 % (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional)...

.. ▶

500.00

TOTALS This Period (last page in this line only) ...

.. ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201710150200267015

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

Transaction ID : **SC/10.9158**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**BELL, JEFFREY,**

Memo Item

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
132 CHRISTIE ST

City  
LEONIA

State  
NJ

ZIP Code  
07605

Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000.00

0.00

1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 11 / D 21 / Y 2016

M M / D D / Y 12/31/2016

0.00 % (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)...

.. ▶

1000.00

**TOTALS** This Period (last page in this line only) ..

.. ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201710130200287016

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE 16 OF 17

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full) **BELL FOR SENATE** Transaction ID : **SC/10.9145**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item **Danker, Rich,** Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address: 4390 Lorcom Ln. Apt 202

City: Arlington State: VA ZIP Code: 22207  Personal Funds of the Candidate

Original Amount of Loan: 368.00 Cumulative Payment To Date: 240.00 Balance Outstanding at Close of This Period: 128.00

**TERMS** Date Incurred: M 07 / D 26 / Y 2016 Date Due: M M / D D / Y 12/31/2016 Interest Rate (if none, enter 0): 0.00 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)... .. 128.00

**TOTALS** This Period (last page in this line only).. .. 4928.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201710130200287017



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

A. Full Name (Last, First, middle Initial) of Debtor or Creditor <b>Capital One</b>			Nature of Debt (Purpose): Credit Card Debt
Mailing Address <b>PO Box 71083</b>			
City <b>Charlotte</b>	State <b>NC</b>	Zip Code <b>28272</b>	

Outstanding Balance Beginning This Period <b>5922.79</b>		Transaction ID : <b>SD10.5743</b>	
Amount Incurred This Period <b>0.00</b>	Payment This Period <b>1136.00</b>	Outstanding Balance at Close of This Period <b>4786.79</b>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chase</b>			Nature of Debt (Purpose): Credit Card Debt
Mailing Address <b>PO Box 15123</b>			
City <b>Wilmington</b>	State <b>DE</b>	Zip Code <b>19850</b>	

Outstanding Balance Beginning This Period <b>3984.84</b>		Transaction ID : <b>SD10.8167</b>	
Amount Incurred This Period <b>0.00</b>	Payment This Period <b>333.00</b>	Outstanding Balance at Close of This Period <b>3651.84</b>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional) ...	<b>8438.63</b>
2) <b>TOTALS</b> This Period (last page this line number) ...	<b>8438.63</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)...	<b>4928.00</b>
4) <b>ADD 2) and 3) and carry forward to appropriate line of Summary Page</b> (last page only)	<b>13366.63</b>

201710130200287018

Faxed  
or  
Hand Delivered

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 10-13-17  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

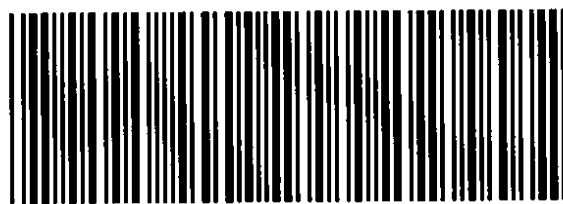
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

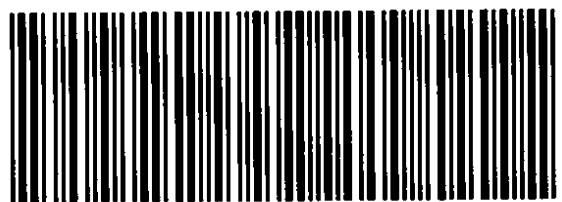
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 10-13-17

201710130200287020



SEN PATCH



SEN PATCH

201710130200267021