

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. CoryPAC Inc

ADDRESS (number and street) 60 Park Place 1st Floor Newark NJ 07102 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00497131 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on 11/06/2012 in the State of NJ (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on 11/06/2012 in the State of NJ

5. Covering Period 10/01/2012 through 11/26/2012

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 Peter D Nichols

Signature of Treasurer Peter D Nichols [Electronically Filed] Date 12/06/2012

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

Office Use Only table with 9 columns and 1 row, and FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CoryPAC Inc

Report Covering the Period: From:    10 / 01 / 2012 To:    11 / 26 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="YYYYYY"/> 2012		142819.74
(b) Cash on Hand at Beginning of Reporting Period.....	71977.07	
(c) Total Receipts (from Line 19) .....	0.00	26000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	71977.07	168819.74
7. Total Disbursements (from Line 31).....	31117.20	127959.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	40859.87	40859.87
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**CoryPAC Inc**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	21000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	21000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	26000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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).....	0.00	0.00
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).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	0.00	26000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	0.00	26000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	28617.20	105159.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	28617.20	105159.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	21500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
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	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	1300.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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 .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	31117.20	127959.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31117.20	127959.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	0.00	26000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	26000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	28617.20	105159.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ▶	28617.20	105159.87

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

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
Travel & Other Expenses

001

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2012			

Transaction ID : SB21B.4463

Amount of Each Disbursement this Period

9235.45
---------

Full Name (Last, First, Middle Initial)

**B. StoneWords**

Mailing Address 25 Roslyn Road

City Branchville State NJ Zip Code 07826

Purpose of Disbursement  
Promotional Materials - Newark

001

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2012			

Transaction ID : SB21B.4463.0

Amount of Each Disbursement this Period

1633.00
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. StoneWords**

Mailing Address 25 Roslyn Road

City Branchville State NJ Zip Code 07826

Purpose of Disbursement  
Promotional Materials - Newark

001

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2012			

Transaction ID : SB21B.4463.1

Amount of Each Disbursement this Period

110.25
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[MEMO ITEM]

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

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

9235.45
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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)

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

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NAME OF COMMITTEE (In Full)  
**CoryPAC Inc**

Full Name (Last, First, Middle Initial) <b>A. US Postal Service - Newark</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2012
Mailing Address 2 Federal Square		<b>Transaction ID : SB21B.4463.2</b>
City Newark	State NJ	
Zip Code 07102	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 766.37
Candidate Name CoryPAC Inc	Category/Type 001	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Annual	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Postal Service - Newark</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2012
Mailing Address 2 Federal Square		<b>Transaction ID : SB21B.4463.3</b>
City Newark	State NJ	
Zip Code 07102	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 4.24
Candidate Name CoryPAC Inc	Category/Type 001	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Annual	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hilton Charlotte Center City</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2012
Mailing Address 222 East 3rd Street		<b>Transaction ID : SB21B.4463.5</b>
City Charlotte	State NC	
Zip Code 28202	Purpose of Disbursement Travel Expense	Amount of Each Disbursement this Period 253.55
Candidate Name CoryPAC Inc	Category/Type 002	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Annual	
State: District:		

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. The Westin Charlotte**

Mailing Address 601 South College Street

City Charlotte State NC Zip Code 28202

Purpose of Disbursement  
Travel Expense

002

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2012

**Transaction ID : SB21B.4463.8**

Amount of Each Disbursement this Period

1424.49
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. The Westin Charlotte**

Mailing Address 601 South College Street

City Charlotte State NC Zip Code 28202

Purpose of Disbursement  
Travel Expense

002

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2012

**Transaction ID : SB21B.4463.9**

Amount of Each Disbursement this Period

583.40
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Renaissance - Charlotte**

Mailing Address 2800 Coliseum Centre Drive

City Charlotte State NC Zip Code 28217

Purpose of Disbursement  
Travel Expense

002

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2012

**Transaction ID : SB21B.4463.10**

Amount of Each Disbursement this Period

29.85
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[MEMO ITEM]

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. Renaissance - Charlotte**

Mailing Address 2800 Coliseum Centre Drive

City Charlotte State NC Zip Code 28217

Purpose of Disbursement  
Travel Expense

Category/  
Type

Candidate Name  
**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

Date of Disbursement

/  /

Transaction ID : **SB21B.4463.11**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hertz Car Rental**

Mailing Address 23 Newark Airport

City Newark State NJ Zip Code 07114

Purpose of Disbursement  
Travel Expene

Category/  
Type

Candidate Name  
**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

Date of Disbursement

/  /

Transaction ID : **SB21B.4463.19**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Hertz Car Rental**

Mailing Address 23 Newark Airport

City Newark State NJ Zip Code 07114

Purpose of Disbursement  
Travel Expense

Category/  
Type

Candidate Name  
**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

Date of Disbursement

/  /

Transaction ID : **SB21B.4463.20**

Amount of Each Disbursement this Period

[MEMO ITEM]

**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)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. Hertz Car Rental**

Mailing Address 23 Newark Airport

City Newark State NJ Zip Code 07114

Purpose of Disbursement  
Travel Expense

002

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : SB21B.4463.21

Amount of Each Disbursement this Period

903.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hertz Car Rental**

Mailing Address 23 Newark Airport

City Newark State NJ Zip Code 07114

Purpose of Disbursement  
Travel Expense

002

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : SB21B.4463.22

Amount of Each Disbursement this Period

33.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Hertz Car Rental**

Mailing Address 23 Newark Airport

City Newark State NJ Zip Code 07114

Purpose of Disbursement  
Travel Expense

002

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : SB21B.4463.23

Amount of Each Disbursement this Period

36.40

[MEMO ITEM]

**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)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
Fee

001

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB21B.4463.24**

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
Credit - Travel Expense

002

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB21B.4463.25**

Amount of Each Disbursement this Period

-43.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
Credit - Travel Expense

002

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB21B.4463.26**

Amount of Each Disbursement this Period

-100.00

[MEMO ITEM]

**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)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
Travel Expense

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.4428**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. LXR the London**

Mailing Address 1020 North San Vicente Boulevard

City West Hollywood State CA Zip Code 90069

Purpose of Disbursement  
Travel Expense

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.4428.5**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. LXR the London**

Mailing Address 1020 North San Vicente Boulevard

City West Hollywood State CA Zip Code 90069

Purpose of Disbursement  
Travel Expense

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.4428.6**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**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)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. US Postal Service - Newark**

Mailing Address 2 Federal Square

City Newark State NJ Zip Code 07102

Purpose of Disbursement Postage

001

Candidate Name

**CoryPAC Inc**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2012			

Transaction ID : SB21B.4428.14

Amount of Each Disbursement this Period

97.69
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Four Seasons Hotel**

Mailing Address 2800 Pennsylvania Avenue NW

City Washington State DC Zip Code 20007

Purpose of Disbursement Travel Expense

002

Candidate Name

**CoryPAC Inc**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2012			

Transaction ID : SB21B.4428.15

Amount of Each Disbursement this Period

1007.74
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. First Bank Merchant Services**

Mailing Address 6201 Powers Ferry Road

City Atlanta State GA Zip Code 30339

Purpose of Disbursement Processing Fee

001

Candidate Name

**CoryPAC Inc**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2012			

Transaction ID : SB21B.4464

Amount of Each Disbursement this Period

94.75
-------

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

94.75
-------

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

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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)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. Bari Mattes**

Mailing Address 231 Tenth Avenue

City New York State NY Zip Code 10021

Purpose of Disbursement  
Fundraising Services

003

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2012

**Transaction ID : SB21B.4422**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Bari Mattes**

Mailing Address 231 Tenth Avenue

City New York State NY Zip Code 10021

Purpose of Disbursement  
Fundraising Services

003

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2012

**Transaction ID : SB21B.4427**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Unionwear**

Mailing Address PO Box 7009

City Newark State NJ Zip Code 07107

Purpose of Disbursement  
Promotional Materials - Newark

001

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) Annual

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 18 / 2012

**Transaction ID : SB21B.4425**

Amount of Each Disbursement this Period

1834.51

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

11834.51

**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)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

**A. Unionwear**

Mailing Address PO Box 7009

City Newark State NJ Zip Code 07107

Purpose of Disbursement  
Promotional Materials - Newark

001

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2012			

**Transaction ID : SB21B.4431**

Amount of Each Disbursement this Period

655.03
--------

Full Name (Last, First, Middle Initial)

**B. Unionwear**

Mailing Address PO Box 7009

City Newark State NJ Zip Code 07107

Purpose of Disbursement  
Promotional Materials - Newark

001

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2012			

**Transaction ID : SB21B.4429**

Amount of Each Disbursement this Period

849.25
--------

Full Name (Last, First, Middle Initial)

**C. Unionwear**

Mailing Address PO Box 7009

City Newark State NJ Zip Code 07107

Purpose of Disbursement  
Promotional Materials - Newark

001

Category/  
Type

Candidate Name

**CoryPAC Inc**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)  Annual

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2012			

**Transaction ID : SB21B.4430**

Amount of Each Disbursement this Period

4025.66
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5529.94
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**TOTAL** This Period (last page this line number only)..... ▶

28420.23
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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)

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

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NAME OF COMMITTEE (In Full)

**CoryPAC Inc**

Full Name (Last, First, Middle Initial)

### A. Tulsi for Hawaii

Mailing Address PO Box 75561

City Kapolei State HI Zip Code 96707

Purpose of Disbursement  
Contribution

011

Candidate Name

**Tulsi Gabbard**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: HI District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	5		2	0	1	2		

Transaction ID : SB23.4432

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

### B.

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

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

### C.

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

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

2	5	0	0	.	0	0
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2	5	0	0	.	0	0
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