



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**ALEX LAW FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	15981.37	24857.53
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15981.37	24857.53
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	8638.01	21638.23
(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)).....	8638.01	21638.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10336.24	
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).....	6600.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**ALEX LAW FOR CONGRESS**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7355.00	8855.00
(ii) Unitemized.....	8626.37	15002.53
(iii) TOTAL of contributions from individuals ▶	15981.37	23857.53
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	1000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15981.37	24857.53
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	6600.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	6600.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	15981.37	31457.53

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8638.01	21638.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	8638.01	21638.23

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2992.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15981.37
25. SUBTOTAL (add Line 23 and Line 24).....	18974.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8638.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10336.24

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

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

FOR LINE NUMBER: PAGE 5 OF 26  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TRAVIS ALBERT**

Mailing Address **3 BLUE RIDGE RD**

City **VOORHEES TOWNSHIP** State **NJ** Zip Code **08043**

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

Name of Employer **EMSL ANALYTICAL, INC** Occupation **PROJECT COORDINATOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2015**

**Transaction ID : SA11AI.4765**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**ACT BLUE**

**B.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2015**

**Transaction ID : SA11AI.4765.0**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address **3 BLUE RIDGE RD**

City **VOORHEES TOWNSHIP** State **NJ** Zip Code **08043**

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

Name of Employer **EMSL ANALYTICAL, INC** Occupation **PROJECT COORDINATOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 19 / 2015**

**Transaction ID : SA11AI.4921**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**ACT BLUE**

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

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

**100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2070.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 22 / 2015**

**Transaction ID : SA11AI.4921.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TRAVIS ALBERT**

Mailing Address **3 BLUE RIDGE RD**

City **VOORHEES TOWNSHIP** State **NJ** Zip Code **08043**

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

Name of Employer **EMSL ANALYTICAL, INC** Occupation **PROJECT COORDINATOR**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 19 / 2015**

**Transaction ID : SA11AI.5169**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item  
ACT BLUE

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2020.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 20 / 2015**

**Transaction ID : SA11AI.5169.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item

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

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

\_\_\_\_\_ **50.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

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

Mailing Address N/A

City N/A State PA Zip Code 08108

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

Name of Employer N/A Occupation N/A

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2015

**Transaction ID : SA11AI.5076**

Amount of Each Receipt this Period  
230.00

Memo Item  
CASH

**B.** Full Name (Last, First, Middle Initial)  
**SUSAN BARRETT**

Mailing Address 213 BURRWOOD AVE

City COLLINGSWOOD State NJ Zip Code 08108

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

Name of Employer SELF Occupation FINANCIAL ADVISOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2015

**Transaction ID : SA11AI.4842**

Amount of Each Receipt this Period  
350.00

Memo Item  
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1970.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2015

**Transaction ID : SA11AI.4842.0**

Amount of Each Receipt this Period  
350.00

Memo Item

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

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

580.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANNE BLANCHARD**

Mailing Address 909 CHERRY LANE

City State Zip Code  
CINNAMINSON NJ 08077

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

Name of Employer Occupation  
SELF N/A

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2015

**Transaction ID : SA11AI.5171**

Amount of Each Receipt this Period  
350.00

Memo Item  
CHECK

**B.** Full Name (Last, First, Middle Initial)  
**ELAINE CLARK**

Mailing Address PO BOX 165

City State Zip Code  
DURHAMVILLE NY 13054

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

Name of Employer Occupation  
AMANDA LARSON NANNY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
395.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 20 / 2015

**Transaction ID : SA11AI.4936**

Amount of Each Receipt this Period  
395.00

Memo Item  
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2465.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 22 / 2015

**Transaction ID : SA11AI.4936.0**

Amount of Each Receipt this Period  
395.00

Memo Item

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

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

745.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL DAWKINS**

Mailing Address **PO BOX 304**

City **CAMDEN** State **NJ** Zip Code **08101**

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

Name of Employer **DAWKINS PLUMBING LLC** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 05 / 2015**

**Transaction ID : SA11AI.5072**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CHECK**

**B.** Full Name (Last, First, Middle Initial)  
**HELENA DUZENSKI**

Mailing Address **216 DEERPARK COURT**

City **MARLTON** State **NJ** Zip Code **08053**

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

Name of Employer **GIUMARELLOS** Occupation **SERVER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 02 / 2015**

**Transaction ID : SA11AI.5008**

Amount of Each Receipt this Period  
**350.00**

Memo Item  
**ACT BLUE**

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4155.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 06 / 2015**

**Transaction ID : SA11AI.5008.0**

Amount of Each Receipt this Period  
**350.00**

Memo Item

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

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

**600.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 26  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID EPLER**

Mailing Address 1758 HILLSIDE DRIVE

City State Zip Code  
CHERRY HILL NJ 08003

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

Name of Employer Occupation  
SELF ATTORNEY/MEDIATOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : SA11AI.5232**

Amount of Each Receipt this Period  
100.00

Memo Item  
ACT BLUE

**B.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address 366 SUMMER STREET

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4830.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2016

**Transaction ID : SA11AI.5232.0**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 1450 WASHINGTON ST

City State Zip Code  
HOBOKEN NJ 07030

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

Name of Employer Occupation  
SELF PR EXECUTIVE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015

**Transaction ID : SA11AI.4773**

Amount of Each Receipt this Period  
20.00

Memo Item  
ACT BLUE

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

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

120.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1170.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2015**

**Transaction ID : SA11AI.4773.0**

Amount of Each Receipt this Period  
**20.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ARIELLE LAWSON**

Mailing Address **11831 RED COAT LANE**

City **HOUSTON** State **TX** Zip Code **77024**

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

Name of Employer Occupation  
**NONE NOT EMPLOYED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 04 / 2015**

**Transaction ID : SA11AI.5052**

Amount of Each Receipt this Period  
**350.00**

Memo Item  
**ACT BLUE**

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4505.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 06 / 2015**

**Transaction ID : SA11AI.5052.0**

Amount of Each Receipt this Period  
**350.00**

Memo Item

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

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

**350.00**

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

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

FOR LINE NUMBER: PAGE 12 OF 26  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTINE O'DONNELL**

Mailing Address 12 RUSSELL CT

City State Zip Code  
NEWTOWN PA 18940

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

Name of Employer Occupation  
NONE NOT EMPLOYED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
540.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : SA11AI.4945**

Amount of Each Receipt this Period  
540.00

Memo Item  
ACT BLUE

**B.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address 366 SUMMER STREET

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3005.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2015

**Transaction ID : SA11AI.4945.0**

Amount of Each Receipt this Period  
540.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTINE O'DONNELL**

Mailing Address 12 RUSSELL CT

City State Zip Code  
NEWTOWN PA 18940

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

Name of Employer Occupation  
NONE NOT EMPLOYED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
890.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015

**Transaction ID : SA11AI.4954**

Amount of Each Receipt this Period  
350.00

Memo Item  
ACT BLUE

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

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

890.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>ACT BLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2015
Mailing Address 366 SUMMER STREET		<b>Transaction ID : SA11AI.4954.0</b>
City SOMERVILLE	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer	Occupation	<input checked="" type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3355.00	

Full Name (Last, First, Middle Initial) <b>CHRISTINE O'DONNELL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2015
Mailing Address 12 RUSSELL CT		<b>Transaction ID : SA11AI.4957</b>
City NEWTOWN	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer NONE	Occupation NOT EMPLOYED	<input type="checkbox"/> Memo Item ACT BLUE
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1240.00	

Full Name (Last, First, Middle Initial) <b>ACT BLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2015
Mailing Address 366 SUMMER STREET		<b>Transaction ID : SA11AI.4957.0</b>
City SOMERVILLE	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer	Occupation	<input checked="" type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3705.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOBY RYAN**

Mailing Address 117 WESTWOOD CIRCLE

City CHARLOTTEVILLE State VA Zip Code 22903

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

Name of Employer UNIVERSITY OF VIRGINIA LAW SCH Occupation DEVELOPMENT OFFICER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : SA11AI.5233**

Amount of Each Receipt this Period  
250.00

Memo Item  
ACT BLUE

**B.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5080.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2016

**Transaction ID : SA11AI.5233.0**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 2 JODI CT

City CHERRY HILL State NJ Zip Code 08003

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

Name of Employer N/A Occupation N/A

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2015

**Transaction ID : SA11AI.4718**

Amount of Each Receipt this Period  
250.00

Memo Item  
CHECK

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

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

Mailing Address 2 JODI CT

City CHERRY HILL State NJ Zip Code 08003

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

Name of Employer N/A Occupation N/A

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2015

**Transaction ID : SA11Al.4716**

Amount of Each Receipt this Period  
250.00

Memo Item  
CHECK

**B.** Full Name (Last, First, Middle Initial)  
**NEAL STENDER**

Mailing Address 2 SHA PA VILLAGE

City LAM TSUEN TAI PO N.T. State ZZ Zip Code 00000

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

Name of Employer SELF Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
441.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2015

**Transaction ID : SA11Al.4818**

Amount of Each Receipt this Period  
50.00

Memo Item  
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1620.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2015

**Transaction ID : SA11Al.4818.0**

Amount of Each Receipt this Period  
50.00

Memo Item

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEAL STENDER**

Mailing Address **2 SHA PA VILLAGE**

City **LAM TSUEN TAI PO N.T.** State **ZZ** Zip Code **00000**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **491.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 30 / 2015**

**Transaction ID : SA11AI.4966**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item  
**ACT BLUE**

**B.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3755.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 06 / 2015**

**Transaction ID : SA11AI.4966.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item

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

Mailing Address **2 SHA PA VILLAGE**

City **LAM TSUEN TAI PO N.T.** State **ZZ** Zip Code **00000**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **541.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 30 / 2015**

**Transaction ID : SA11AI.4967**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item  
**ACT BLUE**

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

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

\_\_\_\_\_ **100.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **3805.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 06 / 2015**

**Transaction ID : SA11AI.4967.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NEAL STENDER**

Mailing Address **2 SHA PA VILLAGE**

City **LAM TSUEN TAI PO N.T.** State **ZZ** Zip Code **00000**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **561.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 23 / 2015**

**Transaction ID : SA11AI.5184**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **20.00**

Memo Item  
ACT BLUE

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4525.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 27 / 2015**

**Transaction ID : SA11AI.5184.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **20.00**

Memo Item

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

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

\_\_\_\_\_ **20.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEAL STENDER**

Mailing Address **2 SHA PA VILLAGE**

City **LAM TSUEN TAI PO N.T.** State **ZZ** Zip Code **00000**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **611.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2015**

**Transaction ID : SA11AI.5261**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item  
**ACT BLUE**

**B.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4730.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 03 / 2016**

**Transaction ID : SA11AI.5261.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

Memo Item

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

Mailing Address **105 MAIN ST**

City **RIVERTON** State **NJ** Zip Code **08077**

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

Name of Employer **BCIU** Occupation **PSYCHOLOGIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 22 / 2015**

**Transaction ID : SA11AI.4780**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **350.00**

Memo Item  
**ACT BLUE**

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

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

\_\_\_\_\_ **400.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ACT BLUE**

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1570.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2015**

**Transaction ID : SA11AI.4780.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **350.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ZACHARY WOOD**

Mailing Address **271 E. ATLANTIC AVENUE**

City **AUDUBON** State **NJ** Zip Code **08106**

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

Name of Employer **RUTGERS UNIVERSITY** Occupation **GRADUATE ASSISTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2015**

**Transaction ID : SA11AI.5248**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250.00**

Memo Item  
ACT BLUE

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5330.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 03 / 2016**

**Transaction ID : SA11AI.5248.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250.00**

Memo Item

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

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

\_\_\_\_\_ **250.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ALEX LAW FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MAXWELL YOUNG**

Mailing Address 1 DEER FIELD DR

City State Zip Code  
VOORHEES NJ 08043

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

Name of Employer Occupation  
AMERINOX N/A

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 13 / 2015

**Transaction ID : SA11Al.4889**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CHECK

**B.** 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

**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).....

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

2000.00

7355.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 26	
	<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)  
**ALEX LAW FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DR. DON'S BUTTONS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3906 W. MORROW DRIVE		Amount of Each Disbursement this Period 334.56
City GLENDALE	State AZ	
Zip Code 85308	Purpose of Disbursement BUTTONS	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 006	<b>Transaction ID : SB17.5273</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FIREBALL PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 3237 AMBER ST, BOX 3 FLOOR 5		Amount of Each Disbursement this Period 4641.84
City PHILADELPHIA	State PA	
Zip Code 19134	Purpose of Disbursement PRINTING	<input type="checkbox"/> Memo Item
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Category/ Type 006	<b>Transaction ID : SB17.5292</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 01		

Full Name (Last, First, Middle Initial) <b>C. MOORESTOWN COMMUNITY HOUSE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 16 E MAIN ST.		Amount of Each Disbursement this Period 650.00
City MOORESTOWN	State NJ	
Zip Code 08057	Purpose of Disbursement MW 12/10 RENTAL	<input type="checkbox"/> Memo Item
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Category/ Type 007	<b>Transaction ID : SB17.4855</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5626.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 26	
	<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)  
**ALEX LAW FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHRIS NAPPI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address N/A		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.5275</b>
City N/A	State NJ Zip Code 08108	
Purpose of Disbursement GRAPHIC DESIGN	Category/Type 006	
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

Full Name (Last, First, Middle Initial) <b>B. SOHA ARTS BUILDING</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 1001 WHITE HORSE PIKE		Amount of Each Disbursement this Period 515.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4857</b>
City HADDON TOWNSHIP	State NJ Zip Code 08107	
Purpose of Disbursement RENT	Category/Type 001	
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

Full Name (Last, First, Middle Initial) <b>C. SOHA ARTS BUILDING</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1001 WHITE HORSE PIKE		Amount of Each Disbursement this Period 515.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4866</b>
City HADDON TOWNSHIP	State NJ Zip Code 08107	
Purpose of Disbursement RENT	Category/Type 001	
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1280.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 26	
	<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)  
**ALEX LAW FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOHA ARTS BUILDING</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 1001 WHITE HORSE PIKE		Amount of Each Disbursement this Period 515.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.5281</b>
City HADDON TOWNSHIP	State NJ Zip Code 08107	
Purpose of Disbursement RENT	Category/Type 001	
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 01		

Full Name (Last, First, Middle Initial) <b>B. SWITCH COMMUNICATIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 100 CALIFORNIA ST		Amount of Each Disbursement this Period 41.77 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.5282</b>
City SAN FRANCISCO	State CA Zip Code 94111	
Purpose of Disbursement PHONE SERVICES	Category/Type 001	
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 01		

Full Name (Last, First, Middle Initial) <b>C. TD BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 1701 ROUTE 70 EAST		Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.5295</b>
City CHERRY HILL	State NJ Zip Code 08034	
Purpose of Disbursement DEPOSIT RETURN CHARGE	Category/Type 001	
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	606.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 26	
	<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)  
**ALEX LAW FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TD BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 1701 ROUTE 70 EAST		Amount of Each Disbursement this Period 20.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.5296</b>
City CHERRY HILL	State NJ	
Zip Code 08034	Purpose of Disbursement DEPOSIT RETURN FEE	Category/ Type 001
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 01	

Full Name (Last, First, Middle Initial) <b>B. WALTERS SIGNS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 159 W WHITE HORSE PIKE		Amount of Each Disbursement this Period 235.40 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4864</b>
City BERLIN	State NJ	
Zip Code 08009	Purpose of Disbursement CAR DECALS	Category/ Type 006
Candidate Name <b>ALEX LAW FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 01	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input 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>SUBTOTAL</b> of Disbursements This Page (optional).....	255.40
<b>TOTAL</b> This Period (last page this line number only).....	7768.57

**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/10.4135

ALEX LAW FOR CONGRESS

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

ALEXANDER LAW

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

204 HILLCREST AVE APT A

City

State

ZIP Code

COLLINGSWOOD

NJ

08108

Original Amount of Loan

3600.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3600.00

**TERMS**

Date Incurred

02 / 27 / 2015

Date Due

11/8/2016

Interest Rate

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)..... ▶

3600.00

**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.

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

NAME OF COMMITTEE (In Full) **ALEX LAW FOR CONGRESS** Transaction ID : **SC/10.4381**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item **ALEXANDER LAW** Election: 2016  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
204 HILLCREST AVE APT A

City State ZIP Code  
COLLINGSWOOD NJ 08108

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

**TERMS**

Date Incurred: M 07 / D 28 / Y 2015  
 Date Due: M / D / Y 11/8/2016  
 Interest Rate: 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	3000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	6600.00

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