

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. **12FE4M5**
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

ADDRESS (number and street) **PO BOX 671**
Check if different than previously reported. (ACC) **CAPE MAY COURT HOUSE NJ 08210**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00726729 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 2022 through / / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
CRATE, BRADLEY, T, MR,
Type or Print Name of Treasurer

Signature of Treasurer CRATE, BRADLEY, T, MR, [Electronically Filed] Date / / 2022

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="41584.93"/>	<input type="text" value="41584.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1714.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="97553.11"/>	<input type="text" value="102553.11"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="99267.81"/>	<input type="text" value="144138.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="72287.50"/>	<input type="text" value="117157.73"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26980.31"/>	<input type="text" value="26980.31"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

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	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(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	5000.00
12. Transfers From Affiliated/Other Party Committees.....	94653.11	94653.11
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.....	2900.00	2900.00
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)).....▶	97553.11	102553.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	97553.11	102553.11

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	12187.50	29057.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	12187.50	29057.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	59100.00	87100.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	1000.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	72287.50	117157.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72287.50	117157.73

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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	5000.00
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	5000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	12187.50	29057.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12187.50	29057.73

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. BEYEL, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1062

City MARMORA	State NJ	Zip Code 08223
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BOULEVARD LIQUOR STORE	Occupation (for Individual) CO OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2022

Transaction ID : SA12.4432

Amount of Each Receipt this Period
2900.00

Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. CHRISTOUDIAS, STAVROS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 741 TEANECK RD STE B

City TEANECK	State NJ	Zip Code 07666
-----------------	-------------	-------------------

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

Name of Employer (for Individual) HERITAGE SURGICAL GROUP	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2022

Transaction ID : SA12.4415

Amount of Each Receipt this Period
2900.00

Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. DANIELS, ALICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 CLIFFSWALLOW DRIVE

City MEDFORD	State NJ	Zip Code 08055
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ARS	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2021

Transaction ID : SA12.4394

Amount of Each Receipt this Period
150.00

Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4381]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. DANIELS, ALICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 CLIFFSWALLOW DRIVE
 City MEDFORD State NJ Zip Code 08055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt **05 / 18 / 2022**
Transaction ID : SA12.4397
 Amount of Each Receipt this Period 1500.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4381]

B. DANIELS, ALICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 CLIFFSWALLOW DRIVE
 City MEDFORD State NJ Zip Code 08055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4550.00

Date of Receipt **08 / 17 / 2022**
Transaction ID : SA12.4426
 Amount of Each Receipt this Period 2900.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. DANIELS, ALICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 CLIFFSWALLOW DRIVE
 City MEDFORD State NJ Zip Code 08055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4950.00

Date of Receipt **09 / 01 / 2022**
Transaction ID : SA12.4449
 Amount of Each Receipt this Period 400.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4379]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. DENAFO, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 WALNUT AVE
 City NORTHFIELD State NJ Zip Code 08225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTREPRENEUR Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 02 / 2022
Transaction ID : SA12.4410
 Amount of Each Receipt this Period 3000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. DIXON, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 EAST ELM AVENUE
 City GALLOWAY State NJ Zip Code 08205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIXON ASSOCIATES ENGINEERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 05 / 2022
Transaction ID : SA12.4417
 Amount of Each Receipt this Period 2900.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. FANUCCI, STACEY, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1932 BROOKFIELD ST
 City VINELAND State NJ Zip Code 08361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINELAND BOARD OF EDUCATION Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 06 / 30 / 2022
Transaction ID : SA12.4391
 Amount of Each Receipt this Period 3000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4381]

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. FRANCO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 EAST FORGET ME NOT ROAD
 City WILDWOOD State NJ Zip Code 08260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEACHWAVES PROPERTIES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 09 / 2022
Transaction ID : SA12.4421
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. HANSEN, EDWINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17369 SE CONCH BAR AVENUE
 City JUPITER State FL Zip Code 33469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 11 / 24 / 2021
Transaction ID : SA12.4392
 Amount of Each Receipt this Period 50.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4381]

C. HANSEN, EDWINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 572 SOUTH ODESSA AVENUE
 City EGG HARBOR CITY State NJ Zip Code 08215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 01 / 2022
Transaction ID : SA12.4448
 Amount of Each Receipt this Period 300.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4379]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. HANSEN, JENNIFER, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 572 S ODESSA AVE
 City EGG HARBOR CITY State NJ Zip Code 08215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENLIGHTENED SOLUTIONS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 22 / 2022
Transaction ID : SA12.4442
 Amount of Each Receipt this Period 900.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. HOLLANDER, KRISTEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 SOUTH KENYON AVE
 City MARGATE CITY State NJ Zip Code 08402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PULSE VASCULIR Occupation (for Individual) FINANCIAL CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 02 / 2022
Transaction ID : SA12.4408
 Amount of Each Receipt this Period 2900.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. HUEN, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 299
 City LINWOOD State NJ Zip Code 08221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEUN LAW OFFICE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2022
Transaction ID : SA12.4401
 Amount of Each Receipt this Period 500.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

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

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

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

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. HUGIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 ESSEX ROAD
 City SUMMIT State NJ Zip Code 07901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTREPRENEUR Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 09 / 2022
Transaction ID : SA12.4419
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. JOHNSON, ROBERT, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 COVERED BRIDGE RD
 City MILLVILLE State NJ Zip Code 08332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAFFE MAGNUM OPUS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 17 / 2022
Transaction ID : SA12.4428
 Amount of Each Receipt this Period 2900.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. JOHNSON, RONALD, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 536 GRAVELLY RUN RD
 City MAYS LANDING State NJ Zip Code 08330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHORE MEDICAL CENTER Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2022
Transaction ID : SA12.4438
 Amount of Each Receipt this Period 1000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

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

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

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

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. LAUDEMAN, KEITH, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 497

City CAPE MAY	State NJ	Zip Code 08204
------------------	-------------	-------------------

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

Name of Employer (for Individual) CAN SPRING FISH	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2022
Transaction ID : SA12.4440

Amount of Each Receipt this Period
5000.00

Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. LUISI, RUDOLPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2755 S LINCOLN AVENUE

City VINELAND	State NJ	Zip Code 08361
------------------	-------------	-------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2022
Transaction ID : SA12.4389

Amount of Each Receipt this Period
100.00

Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4381]

C. MACK, SONDR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BRIDGE PLZ STE 260

City FORT LEE	State NJ	Zip Code 07024
------------------	-------------	-------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2021
Transaction ID : SA12.4396

Amount of Each Receipt this Period
5000.00

Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4381]

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

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

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

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. MILANO, CONSTANTINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 HEATHER LANE
 City RANDOLPH State NJ Zip Code 07869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARTZ MOUNTAIN INDUSTRIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 04 / 2022
Transaction ID : SA12.4413
 Amount of Each Receipt this Period 2900.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. MITA, EUSTACE, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 STILLMEADOW LANE
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICONA RESORTS Occupation (for Individual) CHAIRMAN/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 24 / 2022
Transaction ID : SA12.4434
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. MITA, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 STILLMEADOW LANE
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 08 / 24 / 2022
Transaction ID : SA12.4436
 Amount of Each Receipt this Period 4600.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

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

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

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

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. NIEDWESKE, IRA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 812 DENNISVILLE RD
 City CAPE MAY COURT HOUSE State NJ Zip Code 08210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) VETERINARIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 17 / 2022
Transaction ID : SA12.4425
 Amount of Each Receipt this Period 1200.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. PENZA, ROBERT, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1691 A BROOKFIELD ST
 City VINELAND State NJ Zip Code 08361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL CORALUZZO CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt 12 / 15 / 2021
Transaction ID : SA12.4393
 Amount of Each Receipt this Period 521.15
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4381]

C. PENZA, ROBERT, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1691 A BROOKFIELD ST
 City VINELAND State NJ Zip Code 08361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL CORALUZZO CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 13 / 2022
Transaction ID : SA12.4387
 Amount of Each Receipt this Period 500.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4381]

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

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

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

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. PENZA, ROBERT, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1691 A BROOKFIELD ST
 City VINELAND State NJ Zip Code 08361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL CORALUZZO CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt 08 / 03 / 2022
Transaction ID : SA12.4411
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]: EXCESS TO BE RETURNED TO JFC

B. PIZZA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 MIDDLE ROAD
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHARMASPHERE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2022
Transaction ID : SA12.4402
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. REICHLER, JEFFERY, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4045 BAYSHORE ROAD
 City CAPE MAY State NJ Zip Code 08204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUNDS FISHERIES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2022
Transaction ID : SA12.4404
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

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

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

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

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. REICHLER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1056 SHUNPIKE ROAD
 City CAPE MAY State NJ Zip Code 08204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUNDS FISHERIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 03 / 14 / 2022
Transaction ID : SA12.4386
 Amount of Each Receipt this Period 2100.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4380]

B. ROBERTSON, EDSON, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 562 OLD AVALON BLVD
 City AVALON MANOR State NJ Zip Code 08202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTREPRENEUR Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2022
Transaction ID : SA12.4430
 Amount of Each Receipt this Period 500.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. SCARPA, JOHN, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 40TH STREET
 City AVALON State NJ Zip Code 08202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PRIVATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 02 / 2022
Transaction ID : SA12.4406
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

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

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

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

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. SOLOWAY, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2697

City VINELAND	State NJ	Zip Code 08362
------------------	-------------	-------------------

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

Name of Employer (for Individual) ARTHRITIS & RHEUMATOLOGY ASSOC OF SJ P	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2022

Transaction ID : SA12.4399

Amount of Each Receipt this Period
5000.00

Memo Item
JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. SOUTH JERSEY FIRST
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT STREET 2ND FLOOR

City BEVERLY	State MA	Zip Code 01915
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00739490

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1657.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2022

Transaction ID : SA12.4380

Amount of Each Receipt this Period
1657.87

Memo Item
JFC TRANSFER: SEE ATTRIBUTIONS

C. SOUTH JERSEY FIRST
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT STREET 2ND FLOOR

City BEVERLY	State MA	Zip Code 01915
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00739490

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9074.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2022

Transaction ID : SA12.4381

Amount of Each Receipt this Period
7416.18

Memo Item
JFC TRANSFER: SEE ATTRIBUTIONS

SUBTOTAL of Receipts This Page (optional).....	9074.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. SOUTH JERSEY FIRST
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT STREET 2ND FLOOR

City BEVERLY	State MA	Zip Code 01915
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00739490

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
93480.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA12.4382

Amount of Each Receipt this Period
84406.08

Memo Item
JFC TRANSFER: SEE ATTRIBUTIONS

B. SOUTH JERSEY FIRST
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT STREET 2ND FLOOR

City BEVERLY	State MA	Zip Code 01915
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00739490

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
94653.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

Transaction ID : SA12.4379

Amount of Each Receipt this Period
1172.98

Memo Item
JFC TRANSFER: SEE ATTRIBUTIONS; ALSO INCLUDES FUNDS FROM DONORS PREVIOUSLY DISCLOSED

C. WEBER, BETSY, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 OCEAN DR
UNIT 109

City CAPE MAY	State NJ	Zip Code 08204
------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA12.4444

Amount of Each Receipt this Period
5000.00

Memo Item
JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

SUBTOTAL of Receipts This Page (optional).....	85579.06
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. WEBER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 OCEAN DR
 UNIT 109
 City CAPE MAY State NJ Zip Code 08204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 26 / 2022
Transaction ID : SA12.4446
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

B. WINGATE, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 MORNING GLORY CIRCLE
 City MULLICA HILL State NJ Zip Code 08062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) TREE SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 10 / 2022
Transaction ID : SA12.4423
 Amount of Each Receipt this Period 2900.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4382]

C. WINGATE, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 MORNING GLORY CIRCLE
 City MULLICA HILL State NJ Zip Code 08062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) TREE SERVICE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2955.00

Date of Receipt 09 / 01 / 2022
Transaction ID : SA12.4450
 Amount of Each Receipt this Period 55.00
 Memo Item
 JFC TRANSFER: SOUTH JERSEY FIRST [SA12.4379]

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	94653.11

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. JESSE JENSEN FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 8124

City BONNEY LAKE	State WA	Zip Code 98391
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00720870

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA16.4383

Amount of Each Receipt this Period
2100.00

Memo Item
RETURN OF EXCESS CONTRIBUTIONS

B. JESSE JENSEN FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 8124

City BONNEY LAKE	State WA	Zip Code 98391
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00720870

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

Transaction ID : SA16.4384

Amount of Each Receipt this Period
800.00

Memo Item
RETURN OF EXCESS CONTRIBUTIONS

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2900.00
TOTAL This Period (last page this line number only).....	2900.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input 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)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. CASTLE CONSULTANTS LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4 KEITH DRIVE

City NORTON State MA Zip Code 02766

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4366

Amount of Each Disbursement this Period: 3750.00

Memo Item

B. CHAIN BRIDGE BANK NA

Full Name (Last, First, Middle Initial)

Mailing Address 1445A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4369

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MAI & ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 5153 ISLA KEY BLVD S 412

City ST PETERSBURG State FL Zip Code 33715

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4360

Amount of Each Disbursement this Period: 2770.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6545.00

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

**SCHEDULE 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"/> 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)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

Full Name (Last, First, Middle Initial)

A. MAI & ASSOCIATES

Mailing Address 5153 ISLA KEY BLVD S 412

City ST PETERSBURG State FL Zip Code 33715

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2022

FEC Identification Number

C
Transaction ID : SB21B.4356
Amount of Each Disbursement this Period
2770.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MAI & ASSOCIATES

Mailing Address 5153 ISLA KEY BLVD S 412

City ST PETERSBURG State FL Zip Code 33715

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2022

FEC Identification Number

C
Transaction ID : SB21B.4364
Amount of Each Disbursement this Period
2770.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

5540.00

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

12085.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input 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)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

Full Name (Last, First, Middle Initial) A. BOB HEALEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 31 / 2022
Mailing Address PO BOX 999		FEC Identification Number C C00793646 Transaction ID : SB23.4334
City EDISON	State NJ	Zip Code 08818
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2900.00
Candidate Name HEALEY, ROBERT JR, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NJ	District: 03	

Full Name (Last, First, Middle Initial) B. BOGNET FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 31 / 2022
Mailing Address 1298 N. CHURCH ST. STE. C		FEC Identification Number C C00735688 Transaction ID : SB23.4336
City HAZLE TOWNSHIP	State PA	Zip Code 18202
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name BOGNET, JIM, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 08	

Full Name (Last, First, Middle Initial) C. BOGNET FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 30 / 2022
Mailing Address 1298 N. CHURCH ST. STE. C		FEC Identification Number C C00735688 Transaction ID : SB23.4363
City HAZLE TOWNSHIP	State PA	Zip Code 18202
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 900.00
Candidate Name BOGNET, JIM, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 08	

SUBTOTAL of Disbursements This Page (optional).....▶	5800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE 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"/> 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)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. FRIENDS OF JEREMY SHAFFER

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 391

M M M	/	D D D	/	Y Y Y Y Y
09		26		2022

City GIBSONIA State PA Zip Code 15044

FEC Identification Number

Purpose of Disbursement
FEDERAL CONTRIBUTION

C	C00803726
---	-----------

Candidate Name
SHAFFER, JEREMY, , ,

Category/
Type

Transaction ID : SB23.4362

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: PA District: 17

2900.00

Memo Item

B. J.R. MAJEWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3055 W. ELMORE RD

M M M	/	D D D	/	Y Y Y Y Y
08		31		2022

City PORT CLINTON State OH Zip Code 43452

FEC Identification Number

Purpose of Disbursement
FEDERAL CONTRIBUTION

C	C00770636
---	-----------

Candidate Name
MAJEWSKI, J R, , ,

Category/
Type

Transaction ID : SB23.4338

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: OH District: 09

1500.00

Memo Item

C. KEAN FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 999

M M M	/	D D D	/	Y Y Y Y Y
08		31		2022

City EDISON State NJ Zip Code 08818

FEC Identification Number

Purpose of Disbursement
FEDERAL CONTRIBUTION

C	C00703058
---	-----------

Candidate Name
KEAN, THOMAS H JR, , ,

Category/
Type

Transaction ID : SB23.4340

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NJ District: 07

800.00

Memo Item

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

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

5200.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input 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)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

A. MAYRA FLORES FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 516

City LOS INDIOS State TX Zip Code 78567

Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name
FLORES, MAYRA NOHEMI, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: TX District: 34

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2022

FEC Identification Number

C C00768994

Transaction ID : SB23.4342

Amount of Each Disbursement this Period

2000.00

Memo Item

B. MILLER-MEEKS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 33

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name
MILLER-MEEKS, MARIANNETTE JANE, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IA District: 01

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2022

FEC Identification Number

C C00558825

Transaction ID : SB23.4344

Amount of Each Disbursement this Period

2000.00

Memo Item

C. NICOLEE AMBROSE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4014

City TIMONIUM State MD Zip Code 21094

Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name
AMBROSE, NICOLEE, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MD District: 02

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2022

FEC Identification Number

C C00812891

Transaction ID : SB23.4347

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

5000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input 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)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

Full Name (Last, First, Middle Initial) A. NICOLE FOR NEW YORK		Date of Disbursement MM / DD / YYYY 08 / 31 / 2022
Mailing Address PO BOX 60487		FEC Identification Number C 000694778 Transaction ID : SB23.4345 Amount of Each Disbursement this Period 800.00
City STATEN ISLAND	State NY	Zip Code 10306
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/Type
Candidate Name MALLIOTAKIS, NICOLE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 11	

Full Name (Last, First, Middle Initial) B. NRCC		Date of Disbursement MM / DD / YYYY 08 / 31 / 2022
Mailing Address 320 FIRST STREET SE		FEC Identification Number C 00075820 Transaction ID : SB23.4358 Amount of Each Disbursement this Period 36500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) C. POLIQUIN FOR ME-02		Date of Disbursement MM / DD / YYYY 08 / 26 / 2022
Mailing Address PO BOX 30844		FEC Identification Number C 000775296 Transaction ID : SB23.4349 Amount of Each Disbursement this Period 2900.00
City BETHESDA	State MD	Zip Code 20824
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/Type
Candidate Name POLIQUIN, BRUCE LEE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ME	District: 02	

SUBTOTAL of Disbursements This Page (optional).....▶	40200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE 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"/> 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)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

Full Name (Last, First, Middle Initial)

A. SCHELLER FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Mailing Address PO BOX 3855

City ALLENTOWN State PA Zip Code 18106

FEC Identification Number

C C00722892

Purpose of Disbursement
FEDERAL CONTRIBUTION

Category/Type

Transaction ID : SB23.4351

Amount of Each Disbursement this Period

2900.00

Candidate Name

SCHELLER, LISA, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: PA District: 07

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

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

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

2900.00

59100.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SOUTH JERSEY UNITED IN TRUST (SJUIT) PAC

Full Name (Last, First, Middle Initial)

A. CUMBERLAND COUNTY REPUBLICANS

Mailing Address 424 WEST LANDIS AVE

City
VINELAND

State
NJ

Zip Code
08360

Purpose of Disbursement
NON FEDERAL CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
08 / 23 / 2022

FEC Identification Number

C

Transaction ID : SB29.4353

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

1000.00

1000.00