

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
16 JAN 29 PM 4: 18
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

BELL FOR SENATE

ADDRESS (number and street)

PO BOX 31

Check if different than previously reported. (ACC)

PALISADES PARK

NJ

07650

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00558122

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NJ

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y Y 2015

through

M M /

D D /

Y Y Y Y Y 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Rich Danker

Signature of Treasurer Rich Danker

Date

M M /

D D /

Y Y Y Y Y 2016

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

201602020200029055

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From:

M	M
10	

 /

D	D
01	

 /

Y	Y	Y	Y	Y
2	0	1	5	

 To:

M	M
12	

 /

D	D
31	

 /

Y	Y	Y	Y	Y
2	0	1	5	

	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)) ..	6911.07	566349.88
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	6911.07	566149.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	8132.95	511383.76
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	8132.95	511383.76
8. Cash on Hand at Close of Reporting Period (from Line 27)...	2483.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	15911.63	

For further information contact:

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

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

201602020200029056

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 19

Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From:

M M M / D D D / Y Y Y Y Y Y Y
10 / 01 / 2015

To:

M M M / D D D / Y Y Y Y Y Y Y
12 / 31 / 2015

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)...

2250.00

418104.93

(ii) Unitemized

4661.07

83019.95

(iii) TOTAL of contributions from individuals .

6911.07

501124.88

(b) Political Party Committees...

0.00

0.00

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

0.00

65225.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

6911.07

566349.88

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

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

250.00

35000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

250.00

35000.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.08

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

7161.07

601349.96

201602020200029057

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	8132.95	511383.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	2750.00	35000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	2750.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	200.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	200.00
21. OTHER DISBURSEMENTS ..	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	10882.95	546583.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	6205.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	7161.07
25. SUBTOTAL (add Line 23 and Line 24)...	13366.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	10882.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	2483.47

201602020200029058

**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 19

(check only one)

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

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)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Hadley Arkes

Mailing Address **68 Woodside Ave**

City **Amherst** State **MA** Zip Code **01002**

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

Name of Employer **Amherst College** Occupation **Professor**

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

MM	DD	YYYY
12	09	2015

Transaction ID : SA11AI.9034

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Robert Bauman

Mailing Address **6278 N Federal Hwy #311**

City **Fort Lauderdale** State **FL** Zip Code **33308**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

MM	DD	YYYY
12	23	2015

Transaction ID : SA11AI.9035

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
William Clark

Mailing Address **3716 Maplewood Ave**

City **Dallas** State **TX** Zip Code **75205**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

MM	DD	YYYY
12	31	2015

Transaction ID : SA11AI.9048

Amount of Each Receipt this Period

500.00

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

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

1250.00

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201602020200029059

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

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

FOR LINE NUMBER: PAGE 6 OF 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Georgette Denlinger

Mailing Address 10 Geranium Drive

City Marlton State NJ Zip Code 08053

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt / /

Transaction ID : SA11AI.9031

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
David Gosselin

Mailing Address 62 Jordan Rd

City Willimantic State CT Zip Code 06226

FEC ID number of contributing federal political committee.

Name of Employer Self Occupation Insurance Sales

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt / /

Transaction ID : SA11AI.9051

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Richard Kamin

Mailing Address 13 Downstream Dr

City Flanders State NJ Zip Code 07836

FEC ID number of contributing federal political committee.

Name of Employer Kamin Consulting Group Occupation Partner

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt / /

Transaction ID : SA11AI.9036

Amount of Each Receipt this Period

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

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

201602020200029060

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

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

FOR LINE NUMBER: PAGE 7 OF 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Gilbert Shelton

Mailing Address 18253 Moss Neck Manor Rd

City Fredericksburg State VA Zip Code 22408

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
12 / 31 / 2015

Transaction ID : SA11AI.9047

Amount of Each Receipt this Period
500.00

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
MM / DD / YYYY

Amount of Each Receipt this Period

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
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

500.00

2250.00

201602020200029061

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

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

FOR LINE NUMBER: PAGE 8 OF 19

(check only one)

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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

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

Mailing Address 132 CHRISTIE ST

City LEONIA State NJ Zip Code 07605

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

Name of Employer Bell for Senate Occupation Candidate

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date 4250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA13A.9065

Amount of Each Receipt this Period
 250.00

Loan to Campaign

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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

250.00

250.00

201602020200029062

**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 9 OF 19

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Adobe		Date of Disbursement MM / DD / YYYY 10 / 19 / 2015
Mailing Address 345 Park Ave		Amount of Each Disbursement this Period 51.04
City San Jose	State CA	
Zip Code 95110	Purpose of Disbursement Subscription	Transaction ID : SB17.9006
Candidate Name BELL FOR SENATE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. AMTG Solutions		Date of Disbursement MM / DD / YYYY 10 / 25 / 2015
Mailing Address 9803 Allenford Circle #301		Amount of Each Disbursement this Period 260.00
City Rockville	State MD	
Zip Code 20850	Purpose of Disbursement Website Design	Transaction ID : SB17.8982
Candidate Name BELL FOR SENATE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) c. Capital One		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 490.00
City Charlotte	State NC	
Zip Code 28272	Purpose of Disbursement Credit Card Payment	Transaction ID : SB17.9009
Candidate Name BELL FOR SENATE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	801.04
TOTAL This Period (last page this line number only).....	

2016020200029063

**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 10 OF 19

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address PO Box 71083

City Charlotte State NC Zip Code 28272

Purpose of Disbursement
Credit Card Payment

001
Category/
Type

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2015

Amount of Each Disbursement this Period

497.00

Transaction ID : SB17.9017

B. Capital One

Mailing Address PO Box 71083

City Charlotte State NC Zip Code 28272

Purpose of Disbursement
Credit Card Payment

001
Category/
Type

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2015

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.9025

C. Rich Danker

Mailing Address 4390 Lorcom Ln.
Apt 202

City Arlington State VA Zip Code 22207

Purpose of Disbursement
Management Consulting

001
Category/
Type

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17.9004

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

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

2046.00

201602020200029064

**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 11 OF 19

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Rich Danker		Date of Disbursement MM / DD / YYYY 11 / 25 / 2015	
Mailing Address 4390 Lorcom Ln. Apt 202		Amount of Each Disbursement this Period 579.35	
City Arlington	State VA	Zip Code 22207	Transaction ID : SB17.9018
Purpose of Disbursement Management Consulting		Category/ Type 001	
Candidate Name BELL FOR SENATE		Disbursement For: 2018	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ	District: 00		

Full Name (Last, First, Middle Initial) B. GoDaddy		Date of Disbursement MM / DD / YYYY 10 / 21 / 2015	
Mailing Address 14455 N. Hayden Rd Suite 219		Amount of Each Disbursement this Period 13.17	
City Scottsdale	State AZ	Zip Code 85260	Transaction ID : SB17.8980
Purpose of Disbursement Website		Category/ Type 001	
Candidate Name BELL FOR SENATE		Disbursement For: 2018	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ	District: 00		

Full Name (Last, First, Middle Initial) c. Rao Group		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015	
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 819.20	
City Charlotte	State NC	Zip Code 28226	Transaction ID : SB17.9019
Purpose of Disbursement Fundraising Consulting		Category/ Type 001	
Candidate Name BELL FOR SENATE		Disbursement For: 2018	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ	District: 00		

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

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

1411.72

2016020200029065

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Rao Group

Full Name (Last, First, Middle Initial)
Mailing Address 4020 Amyington Dr

City Charlotte State NC Zip Code 28226

Purpose of Disbursement
Fundraising Consulting

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2015

Amount of Each Disbursement this Period
731.51

Transaction ID : SB17.9020

B. TCD Compliance

Full Name (Last, First, Middle Initial)
Mailing Address 3365 Cherry Ln
Unit D

City Woodbury State MN Zip Code 55129

Purpose of Disbursement
Accounting and Reporting

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement
MM / DD / YYYY
11 / 20 / 2015

Amount of Each Disbursement this Period
375.00

Transaction ID : SB17.9015

C. USPS

Full Name (Last, First, Middle Initial)
Mailing Address 360 Broad Ave

City Princeton State NJ Zip Code 07605

Purpose of Disbursement
Direct Mail Postage

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement
MM / DD / YYYY
12 / 04 / 2015

Amount of Each Disbursement this Period
2584.80

Transaction ID : SB17.9022

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

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

3691.31

20160202000029066

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Wall Street Journal

Full Name (Last, First, Middle Initial)
Mailing Address 200 Liberty Street

City New York State NY Zip Code 10281

Purpose of Disbursement Subscription

Candidate Name **BELL FOR SENATE**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 10 / 29 / 2015

Amount of Each Disbursement this Period: 103.35

Transaction ID : SB17.9003

Category/Type: 001

B. Wells Fargo

Full Name (Last, First, Middle Initial)
Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement Bank Fees

Candidate Name **BELL FOR SENATE**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 10 / 31 / 2015

Amount of Each Disbursement this Period: 17.00

Transaction ID : SB17.9002

Category/Type: 001

c. Wells Fargo

Full Name (Last, First, Middle Initial)
Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement Bank Fees

Candidate Name **BELL FOR SENATE**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 11 / 30 / 2015

Amount of Each Disbursement this Period: 17.00

Transaction ID : SB17.9014

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 137.35

TOTAL This Period (last page this line number only)

201602020200029067

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

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

FOR LINE NUMBER: (check only one)

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

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)
BELL FOR SENATE

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

Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement
Bank Fees

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement
MM / DD / YYYY
12 / 31 / 2015

Amount of Each Disbursement this Period
14.00

Transaction ID : SB17.9021

Category/
Type
001

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

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

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

14.00

8101.42

201602020200029068

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

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

FOR LINE NUMBER: PAGE 15 OF 19
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. JEFFREY BELL

Full Name (Last, First, Middle Initial)

Mailing Address 132 CHRISTIE ST

City LEONIA State NJ Zip Code 07605

Purpose of Disbursement
Loan Payment

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 12 / 07 / 2015

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB19A.9062

Category/Type: 001

B. JEFFREY BELL

Full Name (Last, First, Middle Initial)

Mailing Address 132 CHRISTIE ST

City LEONIA State NJ Zip Code 07605

Purpose of Disbursement
Loan Payment

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 12 / 09 / 2015

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB19A.9063

Category/Type: 001

C. JEFFREY BELL

Full Name (Last, First, Middle Initial)

Mailing Address 132 CHRISTIE ST

City LEONIA State NJ Zip Code 07605

Purpose of Disbursement
Loan Payment

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 12 / 31 / 2015

Amount of Each Disbursement this Period: 250.00

Transaction ID : SB19A.9066

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 2750.00

TOTAL This Period (last page this line number only)..... 2750.00

201602020200029069

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Transaction ID : SC/10.8199

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

[PERSONAL FUNDS]

Election: 2014

JEFFREY BELL

Primary

General

Other (specify) ▼

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2500.00 2500.00 0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM / DD / YYYY
02 / 24 / 2015

MM / DD / YYYY
02 / 24 / 2015

MM / DD / YYYY
02 / 24 / 2015

MM / DD / YYYY
02 / 24 / 2015

MM / DD / YYYY
02 / 24 / 2015

0.00 % (apr)

Yes No

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

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

SUBTOTALS This Period This Page (optional)...

0.00

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

[]

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

201602020200029070

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/10.8296

BELL FOR SENATE

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

[PERSONAL FUNDS]

Election: 2018

JEFFREY BELL

Primary
 General
 Other (specify) ▼

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1500.00

0.00

1500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM / DD / YYYY
04 / 16 / 2015

MM / DD / YYYY
16 / 16 / 2015

MM / DD / YYYY
04 / 16 / 2015

MM / DD / YYYY
04 / 16 / 2015

MM / DD / YYYY
12 / 31 / 2015

MM / DD / YYYY
12 / 31 / 2015

0.00 % (apr)

% (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)...

1500.00

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.

201602020200029071

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Transaction ID : **SC/10.9065**

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

JEFFREY BELL

Election: 2018

Primary
 General
 Other (specify) ▼

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
250.00 250.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 09 / Y 2015 M M / D D / Y 12/31/2015 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)... ▶ 0.00
TOTALS This Period (last page in this line only).. ▶ 1500.00

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

201602020200029072

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

BELL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Capital One

Nature of Debt (Purpose):
Credit Card Debt

Mailing Address PO Box 71083

City State Zip Code
Charlotte NC 28272

Outstanding Balance Beginning This Period

11702.79

Transaction ID : SD10.5743

Amount Incurred This Period

0.00

Payment This Period

2487.00

Outstanding Balance at Close of This Period

9215.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Chase

Nature of Debt (Purpose):
Credit Card Debt

Mailing Address PO Box 15123

City State Zip Code
Wilmington DE 19850

Outstanding Balance Beginning This Period

5195.84

Transaction ID : SD10.8167

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5195.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

14411.63

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

14411.63

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

1500.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

15911.63

201602020200029073

Hand Delivered

201602020200029074

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

Date of Receipt

1-29-16

USPS FIRST CLASS MAIL

Date of Receipt

Postmark

USPS REGISTERED/CERTIFIED

Postmark

USPS PRIORITY MAIL

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

UPS

DHL

AIRBORNE EXPRESS

RECEIVED FROM FEDERAL ELECTION COMMISSION

Date of Receipt

POSTMARK ILLEGIBLE

POSTMARK

FAX

Date of Receipt

OTHER

Date of Receipt or Postmark

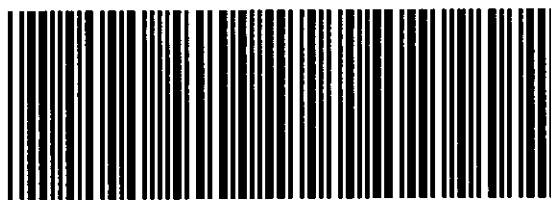
PREPARER

DH

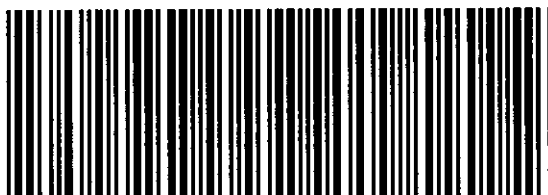
DATE PREPARED

1-29-16

201602020200029075



SEN PATCH



SEN PATCH

201602020200029076