



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**NORPAC**

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="2013"/>		253452.90
(b) Cash on Hand at Beginning of Reporting Period.....	248206.33	
(c) Total Receipts (from Line 19) .....	33934.65	38345.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	282140.98	291798.55
7. Total Disbursements (from Line 31).....	25694.44	35352.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	256446.54	256446.54
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**NORPAC**

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).....	33861.00	38272.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	33861.00	38272.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	33861.00	38272.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	73.65	73.65
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))..... ▶	33934.65	38345.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	33934.65	38345.65

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	15444.44	24802.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15444.44	24802.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10250.00	3550.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	7000.00
(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	7000.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25694.44	35352.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25694.44	35352.01

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	33861.00	38272.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	7000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	33861.00	31272.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	15444.44	24802.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15444.44	24802.01

: 97 `A -G7 9 @C B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`ZG7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: F3XA  
Transaction ID :

The aggregate year-to-date totals on Schedule A show the total contributions from individuals that were received by the PAC in that year. Earmarked donations for campaigns (NORPAC acting as a conduit) entered as memos are not included in the aggregate totals. Therefore the aggregate year-to-date total may appear incorrect (as it is often less than the total earmark) but it is actually recorded and calculated correctly. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. No mission expenditures on Schedule B are on behalf of specifically identified federal candidates and therefore no additional information needs to be disclosed on Schedule B or E. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. Any public communications such as ads are designed to recruit members to the mission and do not express advocacy or voter driver activity for any Federal candidates. Therefore no additional information needs to be disclosed on Schedule B or E

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**NORPAC**

**A. Shlomo Bar-Ayal**  
Full Name (Last, First, Middle Initial)  
Mailing Address 370 Central Park West  
City New York State NY Zip Code 10025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer E-Tactics, Inc Occupation Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 22 / 2013  
**Transaction ID : SA11AI.34851**  
Amount of Each Receipt this Period 250.00  
Mission Registration

**B. Alan Berger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 24 Sutton Pl.  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2013  
**Transaction ID : SA11AI.34814**  
Amount of Each Receipt this Period 500.00  
Earmark Tim Scott

**C. Marc Berger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 210 W. 89th St.  
City New York State NY Zip Code 10024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2013  
**Transaction ID : SA11AI.34813**  
Amount of Each Receipt this Period 500.00  
Earmark Tim Scott

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00  
**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 37
	<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Yehuda Blinder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 95 Dwight Pl  
 City Englewood State NJ Zip Code 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ADAR Investment Mgmt Occupation Finance  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 18 / 2013**  
**Transaction ID : SA11AI.34812**  
 Amount of Each Receipt this Period **1000.00**  
 Earmark Tim Scott

**B. Hedy Blum**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 695 TANWOOD DRIVE  
 City WEST HEMPSTEAD State NY Zip Code 11552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Self  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **125.00**

Date of Receipt **02 / 25 / 2013**  
**Transaction ID : SA11AI.34857**  
 Amount of Each Receipt this Period **125.00**  
 Mission Registration

**C. Robert Braun**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 Lakeshore Dr  
 City Rockaway State NJ Zip Code 07866  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Picatinny Arsenal Occupation Engineer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt **02 / 08 / 2013**  
**Transaction ID : SA11AI.34835**  
 Amount of Each Receipt this Period **225.00**  
 Mission Registration

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1350.00</b>
<b>TOTAL</b> 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:	PAGE 9 OF 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial) <b>A. Bruce Bukiet</b>		Date of Receipt MM / DD / YYYY 02 / 11 / 2013 <b>Transaction ID : SA11AI.34838</b>
Mailing Address 45 Woodland Ave.		Amount of Each Receipt this Period 125.00
City West Orange	State NJ	Zip Code 07052
FEC ID number of contributing federal political committee. C	Mission Registration	
Name of Employer NJIT	Occupation professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

Full Name (Last, First, Middle Initial) <b>B. Ben Chouake</b>		Date of Receipt MM / DD / YYYY 02 / 25 / 2013 <b>Transaction ID : SA11AI.34821</b>
Mailing Address 245 Hutchinson Rd.		Amount of Each Receipt this Period 2000.00
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C	Earmark Tim Scott	
Name of Employer Self	Occupation MD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Ben Chouake</b>		Date of Receipt MM / DD / YYYY 02 / 28 / 2013 <b>Transaction ID : SA11AI.34826</b>
Mailing Address 245 Hutchinson Rd.		Amount of Each Receipt this Period 4000.00
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Self	Occupation MD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6125.00
<b>TOTAL</b> 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 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Esther Chouake**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 245 Hutchinson Rd.  
 City Englewood State NJ Zip Code 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation MD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2013  
**Transaction ID : SA11AI.34825**  
 Amount of Each Receipt this Period  
 4000.00  
 Donation

**B. Esther Chouake**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 245 Hutchinson Rd.  
 City Englewood State NJ Zip Code 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation MD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2013  
**Transaction ID : SA11AI.34827**  
 Amount of Each Receipt this Period  
 1000.00  
 Earmark - Lowey

**C. Jamie Clare**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 Huguenot Ave  
 City Englewood State NJ Zip Code 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cole, Schotz, Meisel, Forman & Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2013  
**Transaction ID : SA11AI.34810**  
 Amount of Each Receipt this Period  
 250.00  
 Earmark Tim Scott

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.34827

See March 1 for check sent to Lowey for Congress

Form/Schedule:

Transaction ID:

**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 37
	<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial) <b>A. Martin Cohen</b>		Date of Receipt MM / DD / YYYY 02 / 25 / 2013 <b>Transaction ID : SA11AI.34855</b>
Mailing Address 484 Roy Street		Amount of Each Receipt this Period 125.00
City West Hempstead	State NY	Zip Code 11552
FEC ID number of contributing federal political committee. C	Mission Registration	
Name of Employer CPA	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

Full Name (Last, First, Middle Initial) <b>B. moshe cyviner</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2013 <b>Transaction ID : SA11AI.34808</b>
Mailing Address 239 S. 6th Ave Apt 102		Amount of Each Receipt this Period 125.00
City Highland Park	State NJ	Zip Code 08904
FEC ID number of contributing federal political committee. C	Mission Registration	
Name of Employer Martin and Edith Stein	Occupation Hospice Aide	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

Full Name (Last, First, Middle Initial) <b>C. Galina Datskovsky</b>		Date of Receipt MM / DD / YYYY 02 / 11 / 2013 <b>Transaction ID : SA11AI.34836</b>
Mailing Address 5 Chittenden Road		Amount of Each Receipt this Period 250.00
City Fair Lawn	State NJ	Zip Code 07410
FEC ID number of contributing federal political committee. C	Mission Registration	
Name of Employer Autonomy an hp company	Occupation SVP Information Governance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial) <b>A. Marshall Dumont</b>		Date of Receipt MM / DD / YYYY 02 / 01 / 2013 <b>Transaction ID : SA11AI.34804</b>
Mailing Address 345 Richard Street		Amount of Each Receipt this Period 125.00
City West Hempstead	State NY	Zip Code 11552
FEC ID number of contributing federal political committee. C		Mission Registration
Name of Employer self	Occupation Financial management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

Full Name (Last, First, Middle Initial) <b>B. lawrence dvores</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2013 <b>Transaction ID : SA11AI.34823</b>
Mailing Address na		Amount of Each Receipt this Period 125.00
City na	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Mission Registration
Name of Employer na	Occupation na	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

Full Name (Last, First, Middle Initial) <b>C. Reuven Escott</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2013 <b>Transaction ID : SA11AI.34863</b>
Mailing Address 55 Regent St.		Amount of Each Receipt this Period 125.00
City Bergenfield	State NJ	Zip Code 07621
FEC ID number of contributing federal political committee. C		Mission Registration
Name of Employer Self	Occupation Securities Trader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> 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: PAGE 14 OF 37  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Reuven Escott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 Regent St.  
 City Bergenfield State NJ Zip Code 07621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Securities Trader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2013  
**Transaction ID : SA11AI.34865**  
 Amount of Each Receipt this Period 75.00  
 Mission Registration

**B. Mollie Fisch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 Merrison Street  
 City Teaneck State NJ Zip Code 07666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Schering Plough Pharmaceuticals Occupation Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2013  
**Transaction ID : SA11AI.34837**  
 Amount of Each Receipt this Period 375.00  
 Mission Registration

**C. Allen Friedman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 315 Johnson Avenue  
 City Teaneck State NJ Zip Code 07666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J.P. Morgan Chase Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2013  
**Transaction ID : SA11AI.34822**  
 Amount of Each Receipt this Period 500.00  
 Earmark Tim Scott

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00  
**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:	PAGE 15 OF 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Menachem Genack**  
Full Name (Last, First, Middle Initial)  
Mailing Address 129 Meadowbrook Rd.  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Union of Orthodox Jewish Cong. Occupation Rabbinic Administrator  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2013  
**Transaction ID : SA11AI.34824**  
Amount of Each Receipt this Period 500.00  
Donations

**B. Jacob Guttman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 430 Nocella Ct  
City West Hepstead State NY Zip Code 11552  
FEC ID number of contributing federal political committee. **C**  
Name of Employer citibank Occupation IT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 25 / 2013  
**Transaction ID : SA11AI.34853**  
Amount of Each Receipt this Period 125.00  
Mission Registration

**c. Jack Halpern**  
Full Name (Last, First, Middle Initial)  
Mailing Address 160 W. 66th St.  
City New York State NY Zip Code 10023  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Atlantic Realty Occupation Real Estate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 18 / 2013  
**Transaction ID : SA11AI.34815**  
Amount of Each Receipt this Period 2500.00  
Earmark Tim Scott

**SUBTOTAL** of Receipts This Page (optional).....▶ 3125.00  
**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 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Marc Hanfling**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 47 Leslie St.  
 City Edison State NJ Zip Code 08817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation physician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 17 / 2013  
**Transaction ID : SA11AI.34847**  
 Amount of Each Receipt this Period  
**250.00**  
 Mission Registration

**B. Robert Harris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 507 Woodfield Ave  
 City West Hempstead State NY Zip Code 11552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lazarus & Harris Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **125.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 02 / 2013  
**Transaction ID : SA11AI.34828**  
 Amount of Each Receipt this Period  
**125.00**  
 Mission Registration

**C. Scott Herschmann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102 Huguenot Ave.  
 City Englewood State NJ Zip Code 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation trader  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 18 / 2013  
**Transaction ID : SA11AI.34811**  
 Amount of Each Receipt this Period  
**2500.00**  
 Earmark Tim Scott

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2875.00</b>
<b>TOTAL</b> 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: PAGE 17 OF 37  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Barry Honig**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 151 Deerfield Drive  
 City Tenafly State NJ Zip Code 07670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer North Jersey Republicans Occupation executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 07 / 2013  
**Transaction ID : SA11AI.34834**  
 Amount of Each Receipt this Period  
 275.00  
 Mission Registration

**B. Aviva Itzkowitz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1646 Buckingham Rd.  
 City Teaneck State NJ Zip Code 07666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Personal Assistant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2013  
**Transaction ID : SA11AI.34844**  
 Amount of Each Receipt this Period  
 125.00  
 Mission Registration

**C. Harry Kanner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 Van Nostrand Ave.  
 City Englewood State NJ Zip Code 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dennis Publishing, Inc. Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2013  
**Transaction ID : SA11AI.34839**  
 Amount of Each Receipt this Period  
 125.00  
 Mission Registration

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**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 18 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Monique Katz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 300 E Linden Ave  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Columbia Presbyterian Occupation MD  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **3750.00**

Date of Receipt **02 / 25 / 2013**  
**Transaction ID : SA11AI.34820**  
Amount of Each Receipt this Period **3750.00**  
Donation

**B. Mordecai Katz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 300 E. Linden Ave.  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Physician  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **3750.00**

Date of Receipt **02 / 25 / 2013**  
**Transaction ID : SA11AI.34819**  
Amount of Each Receipt this Period **3750.00**  
Donation

**C. Genee Kaye**  
Full Name (Last, First, Middle Initial)  
Mailing Address 770 Downing Street  
City Teaneck State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer YU Occupation Teacher  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **125.00**

Date of Receipt **02 / 04 / 2013**  
**Transaction ID : SA11AI.34833**  
Amount of Each Receipt this Period **125.00**  
Mission Registration

**SUBTOTAL** of Receipts This Page (optional)..... **7625.00**  
**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 19 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Joshua Lamm**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 233 Windsor Lane  
 City West Hempstead State NY Zip Code 11552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Physician Occupation Self  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 23 / 2013**  
**Transaction ID : SA11AI.34852**  
 Amount of Each Receipt this Period **250.00**  
 Mission Registration

**B. David Laufer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 639 Adams Place  
 City West Hempstead State NY Zip Code 11552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer R.L. Plastics Occupation Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **125.00**

Date of Receipt **02 / 26 / 2013**  
**Transaction ID : SA11AI.34861**  
 Amount of Each Receipt this Period **125.00**  
 Mission Registration

**C. Kevin Lemmer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 Downey Dr.  
 City Tenafly State NJ Zip Code 07670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ADAR Investment Management Occupation Portfolio Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 20 / 2013**  
**Transaction ID : SA11AI.34816**  
 Amount of Each Receipt this Period **500.00**  
 Earmark Tim Scott

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>875.00</b>
<b>TOTAL</b> 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 20 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NORPAC**

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

Mailing Address 311 Denison St

City Highland Park State NJ Zip Code 08904

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

Name of Employer Occupation

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  
 02 / 05 / 2013  
**Transaction ID : SA11AI.34805**

Amount of Each Receipt this Period  
100.00

Mission Registration

**B. Marcia Levinson**  
Full Name (Last, First, Middle Initial)

Mailing Address 419 Becker Street

City Highland Park State NJ Zip Code 08904

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

Name of Employer Occupation  
Park Eye Center Receptionist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2013  
**Transaction ID : SA11AI.34829**

Amount of Each Receipt this Period  
250.00

Mission Registration

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

Mailing Address 27 Prospect Rd

City Livingston State NJ Zip Code 07039

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

Name of Employer Occupation  
Avrtek Consulting Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 04 / 2013  
**Transaction ID : SA11AI.34832**

Amount of Each Receipt this Period  
350.00

Mission Registration

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 21 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NORPAC**

**A. Roz Lipsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28 Lakeview Dr  
 City West Orange State NJ Zip Code 07052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Pharmaceutical  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2013  
**Transaction ID : SA11AI.34849**  
 Amount of Each Receipt this Period  
 125.00  
 Mission Registration

**B. Ruth Loebmann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3601 Johnson Ave #4J  
 City Bronx State NY Zip Code 10463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2013  
**Transaction ID : SA11AI.34818**  
 Amount of Each Receipt this Period  
 125.00  
 Mission Registration

**C. stanislav maydan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address na  
 City na State NJ Zip Code 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer na Occupation na  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2013  
**Transaction ID : SA11AI.34840**  
 Amount of Each Receipt this Period  
 125.00  
 Mission Registration

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> 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 22 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NORPAC**

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

Mailing Address 30 Edgemount Road

City Edison State NJ Zip Code 08817

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

Name of Employer BNY Mellon Occupation computer programmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 21 / 2013  
**Transaction ID : SA11AI.34850**

Amount of Each Receipt this Period 250.00

Mission Registration

**B. joseph rapaport**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Stanford Ct

City West Orange State NJ Zip Code 07052

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 13 / 2013  
**Transaction ID : SA11AI.34807**

Amount of Each Receipt this Period 200.00

Mission Registration

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

Mailing Address 4 Musket Court

City East Brunswick State NJ Zip Code 08816

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 19 / 2013  
**Transaction ID : SA11AI.34848**

Amount of Each Receipt this Period 250.00

Mission Registration

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**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: PAGE 23 OF 37  
(check only one)

<input checked="" 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 type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NORPAC**

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

Mailing Address 334 North Eighth Ave.

City Edison State NJ Zip Code 08817

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

Name of Employer Johnson and Johnson Occupation Epidemiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2013  
**Transaction ID : SA11AI.34864**

Amount of Each Receipt this Period  
200.00

Mission Registration

Full Name (Last, First, Middle Initial)  
**B. Ethel Scher**

Mailing Address 3333 Henry Hudson Pkwy

City Bronx State NY Zip Code 10463

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

Name of Employer retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 04 / 2013  
**Transaction ID : SA11AI.34830**

Amount of Each Receipt this Period  
250.00

Mission Registration

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

Mailing Address 637 thames blvd

City teaneck State NJ Zip Code 07666

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

Name of Employer pacific data vision Occupation exec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2013  
**Transaction ID : SA11AI.34858**

Amount of Each Receipt this Period  
125.00

Mission Registration

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00

**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 24 OF 37
	<input checked="" 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 type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NORPAC**

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

Mailing Address 637 thames blvd

City teaneck State NJ Zip Code 07666

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

Name of Employer pacific data vision Occupation exec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2013  
**Transaction ID : SA11AI.34859**

Amount of Each Receipt this Period  
75.00

Mission Registration

**B. Allan Schwartz**  
Full Name (Last, First, Middle Initial)

Mailing Address 590 Maitland Ave

City Teaneck State NJ Zip Code 07666

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

Name of Employer AMP Networks Occupation VP Sales & Business Dev.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 17 / 2013  
**Transaction ID : SA11AI.34845**

Amount of Each Receipt this Period  
125.00

Mission Registration

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

Mailing Address 40 EDGEMOUNT ROAD

City EDISON State NJ Zip Code 08817

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

Name of Employer State of New Jersey Occupation Retired Educator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
161.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2013  
**Transaction ID : SA11AI.34842**

Amount of Each Receipt this Period  
161.00

Mission Registration

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	361.00
<b>TOTAL</b> 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 25 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NORPAC**

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

Mailing Address 475 Engle St.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Business consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2013  
**Transaction ID : SA11AI.34843**

Amount of Each Receipt this Period  
200.00

Mission Registration

Full Name (Last, First, Middle Initial)  
**B. shlomo ziegler**

Mailing Address 21 price dr

City edison State NJ Zip Code 08817

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

Name of Employer tullett prebon Occupation computers

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2013  
**Transaction ID : SA11AI.34866**

Amount of Each Receipt this Period  
125.00

Mission Registration

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

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) ▼

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	33861.00

**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 26 OF 37
<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 type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial) <b>A. Valley National Bank</b>		Date of Receipt
Mailing Address 1445 Valley Rd		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Wayne	NJ	07470
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA17.34868</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="73.55"/>
Receipt For:	Aggregate Year-to-Date ▼	CD interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="73.55"/>	

Full Name (Last, First, Middle Initial) <b>B. Valley National Bank</b>		Date of Receipt
Mailing Address 1445 Valley Rd		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Wayne	NJ	07470
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA17.34869</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="0.10"/>
Receipt For:	Aggregate Year-to-Date ▼	interest income
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="73.65"/>	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="73.65"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="73.65"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. 5 Towns Jewish Times**

Mailing Address PO Box 690

City State Zip Code  
Lawrence NY 11559

Purpose of Disbursement  
mission ad

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2013

**Transaction ID : SB21B.34792**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mindy Berman**

Mailing Address 312 Cedar Ave

City State Zip Code  
Highland Park NJ 08904

Purpose of Disbursement  
payroll

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2013

**Transaction ID : SB21B.34797**

Amount of Each Disbursement this Period

1001.01

Full Name (Last, First, Middle Initial)

**C. D.L. Simmons Security Agency**

Mailing Address 7716 Rotherham Dr.

City State Zip Code  
Hanover MD 21076

Purpose of Disbursement  
security officer (mission)

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2013

**Transaction ID : SB21B.34784**

Amount of Each Disbursement this Period

135.68

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

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

1386.69

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. Sandra Dube**

Mailing Address 405 North 8th Ave

City Edison State NJ Zip Code 08817

Purpose of Disbursement  
payroll

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 20 / 2013

**Transaction ID : SB21B.34795**

Amount of Each Disbursement this Period

330.19

Full Name (Last, First, Middle Initial)

**B. Elavon**

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Elavon merchant service fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 28 / 2013

**Transaction ID : SB21B.34870**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Evan Gorin**

Mailing Address 597 Empire Blvd. Apt #3

City Brooklyn State NY Zip Code 11213

Purpose of Disbursement  
Web Development - Mission Control

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 07 / 2013

**Transaction ID : SB21B.34790**

Amount of Each Disbursement this Period

691.00

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

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

1071.19

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. Evan Gorin**

Mailing Address 597 Empire Blvd. Apt #3

City State Zip Code  
Brooklyn NY 11213

Purpose of Disbursement  
Web Development - Mission Control

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34802**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Internal Revenue Service**

Mailing Address N/A

City State Zip Code  
Ogden UT 84201

Purpose of Disbursement  
IRS Tax Payment Yr 2012

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34803**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Long Island Jewish World**

Mailing Address 1525 Central Ave

City State Zip Code  
Far Rockaway NY 11691

Purpose of Disbursement  
mission ad

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34789**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. Medical Faculty Associates, Inc.**

Mailing Address 2120 L Street NW, Suite 530

City Washington State DC Zip Code 20037

Purpose of Disbursement  
Medical Staff/Nurse for Mission

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34785**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. NJ Jewish News**

Mailing Address 901 Route 10

City Whippany State NJ Zip Code 07981

Purpose of Disbursement  
mission ad

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34799**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Leonor Nunez**

Mailing Address 526 Longview Ave

City Cliffside Park State NJ Zip Code 07010

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34787**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 1551 S. Washington Ave.

City State Zip Code  
Piscataway NJ 08854

Purpose of Disbursement  
taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34780**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 1551 S. Washington Ave.

City State Zip Code  
Piscataway NJ 08854

Purpose of Disbursement  
invoice

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34782**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 1551 S. Washington Ave.

City State Zip Code  
Piscataway NJ 08854

Purpose of Disbursement  
taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.34783**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. paypal**

Mailing Address PO Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement fee

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

Transaction ID : SB21B.34867

Amount of Each Disbursement this Period

178.21

Full Name (Last, First, Middle Initial)

**B. Queens Jewish Link**

Mailing Address 147-25 70th Avenue

City Flushing State NY Zip Code 11367

Purpose of Disbursement mission ad

004

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2013

Transaction ID : SB21B.34793

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

**C. Mr Josef Schranz**

Mailing Address 3 Buena Vista Road

City Suffern State NY Zip Code 10901

Purpose of Disbursement payroll

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2013

Transaction ID : SB21B.34788

Amount of Each Disbursement this Period

1939.18

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

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

2917.39



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. Mr Josef Schranz**

Mailing Address 3 Buena Vista Road

City Suffern State NY Zip Code 10901

Purpose of Disbursement payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2013

**Transaction ID : SB21B.34796**

Amount of Each Disbursement this Period

1072.45
---------

Full Name (Last, First, Middle Initial)

**B. Square, Inc**

Mailing Address 110 5th Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2013

**Transaction ID : SB21B.34872**

Amount of Each Disbursement this Period

327.81
--------

Full Name (Last, First, Middle Initial)

**C. Valley National Bank**

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement merchant service fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2013

**Transaction ID : SB21B.34781**

Amount of Each Disbursement this Period

20.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1420.26
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. Valley National Bank**

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement  
Credit Card

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2013

**Transaction ID : SB21B.34791**

Amount of Each Disbursement this Period

4516.83

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Verizon wireless**

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement  
cell phone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 25 / 2013

**Transaction ID : SB21B.34798**

Amount of Each Disbursement this Period

126.90

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/  
Type

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

4643.73

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

15444.44

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.34791

50502 Exxon 218.42 50502 Kippah King 3,795.00 50502 Staples 110.77 50502 Know Who 199.00 50502 Fax Services 107.94 50502 Constant Contact 80.00 50502 USPS 5.70

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NORPAC**

Full Name (Last, First, Middle Initial)

**A. TIM SCOTT FOR SENATE**

Mailing Address 1405 ASHLEY RIVER ROAD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement  
Earmarked Donation to Tim Scott

Candidate Name  
**TIM SCOTT FOR CONGRESS**

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2013

**Transaction ID : SB23.34800**

Amount of Each Disbursement this Period

10250.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

10250.00

10250.00

: 97 `A -G7 9 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A -N5 H-CB

Form/Schedule: SB23

Transaction ID : SB23.34800

Contributors to Tim Scott: BergerAlan\$500.00 BergerMarc\$500.00 BlinderYehuda\$1,000.00 ClareJamie\$250.00  
ChouakeBen\$2,000.00 FriedmanAllen\$500.00 HalpernJack\$2,500.00 HerschmannScott\$2,500.00 LemmerKevin  
\$500.00

Form/Schedule:

Transaction ID: