

CONNELL FOLEY PAC
A New Jersey Non-Profit Corporation
85 Livingston Avenue
Roseland, New Jersey 07068-3702
(973) 535-0500
Facsimile: (973) 535-9217

RECEIVED
2014 JUL 11 AM 11:14
FEC MAIL CENTER

July 10, 2014

VIA FEDERAL EXPRESS

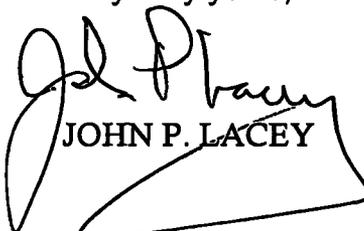
Federal Election Commission
999 E Street, NW
Washington, DC 20463

**Re: Connell Foley PAC, a New Jersey
Non-Profit Corporation
FED ID No. C00388181**

Dear Sir:

Enclosed for filing please find an original FEC Form 3X, Report of Receipts and Disbursements filed on behalf of Connell Foley PAC, a New Jersey Non-Profit Corporation, for the period April 1, 2014 through June 30, 2014.

Very truly yours,


JOHN P. LACEY

JPL:pb
Enclosure

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
2014 JUL 11 AM 11:14
FEC MAIL CENTER
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

C O N N E L L , F O L E Y , P A C

ADDRESS (number and street) 8 5 L I V I N G S T O N , A V E N U E

Check if different than previously reported. (ACC)

R O S E L A N D N J 0 7 0 6 8 - 3 7 0 2

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 0 0 3 8 8 1 8 1

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M / D D / Y Y Y Y in the State of

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

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

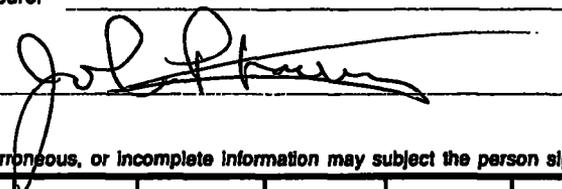
Election on M M / D D / Y Y Y Y In the State of

5. Covering Period 0 4 0 1 2 0 1 4 through 0 6 3 0 2 0 1 4

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 JOHN P. LACEY

Signature of Treasurer



Date 0 7 1 0 2 0 1 4

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 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CONNELL FOLEY PAC

Report Covering the Period: From: 04 / 01 / 2014 To: 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="YYYY"/> 2014		<input type="text" value="96494"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="91094"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="1300000"/>	<input type="text" value="1300000"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1391094"/>	<input type="text" value="1396494"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1265300"/>	<input type="text" value="1270700"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="125794"/>	<input type="text" value="125794"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

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)

Page 3

Write or Type Committee Name

CONNELL FOLEY PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 4 To: M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 4

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).....	1 1 3 9 5 8 0	1 1 3 9 5 8 0
(ii) Unitemized.....	1 6 0 4 2 0	1 6 0 4 2 0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1 3 0 0 0 0 0	1 3 0 0 0 0 0
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	1 3 0 0 0 0 0	1 3 0 0 0 0 0
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1 3 0 0 0 0 0	1 3 0 0 0 0 0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1 3 0 0 0 0 0	1 3 0 0 0 0 0

**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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	5 3 0 0	1 0 7 0 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5 3 0 0	1 0 7 0 0
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1 2 6 0 0 0 0	1 2 6 0 0 0 0
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1 2 6 5 3 0 0	1 2 7 0 7 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1 2 6 5 3 0 0	1 2 7 0 7 0 0

**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 1 OF 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. CROMIE, JOHN D		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 4
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 1 0 9 6 3
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1 0 9 6 3	

Full Name (Last, First, Middle Initial) B. GARDNER, KEVIN R		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 4
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 1 9 7 6 9
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1 9 7 6 9	

Full Name (Last, First, Middle Initial) C. LACEY, JOHN P		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 4
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 9 6 1 6
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9 6 1 6	

SUBTOTAL of Receipts This Page (optional).....▶	4 0 3 4 8
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 2 OF 18	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
13	14	15
		<input type="checkbox"/> 12
		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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. MCBRIDE, MICHAEL X		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 13930
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1 3 9 3 0	

Full Name (Last, First, Middle Initial) B. MCCANN, JAMES C		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 11413
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1 1 4 1 3	

Full Name (Last, First, Middle Initial) C. MCGOVERN, PHILIP F		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 13479
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1 3 4 7 9	

SUBTOTAL of Receipts This Page (optional).....▶	3 8 8 2 2
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 3 OF 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. MORYAN, JEFFREY W		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 9617
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		Aggregate Year-to-Date ▼ 9617
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. PIZZI, PETER J		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 11142
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		Aggregate Year-to-Date ▼ 11142
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. VITIELLO, ANTHONY F		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 16804
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		Aggregate Year-to-Date ▼ 16804
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	37563
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 4 OF 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial)
A. WALSH, LIZA M

Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. **C 0 0 3 8 8 1 8 1**

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2 6 5 0 7**

Date of Receipt
0 4 / 0 8 / 2 0 1 4

Amount of Each Receipt this Period
2 6 5 0 7

Full Name (Last, First, Middle Initial)
B. CORRISTON, TIMOTHY M

Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. **C 0 0 3 8 8 1 8 1**

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Primary General Other (specify) Aggregate Year-to-Date **6 3 8 1**

Date of Receipt
0 4 / 0 8 / 2 0 1 4

Amount of Each Receipt this Period
6 3 8 1

Full Name (Last, First, Middle Initial)
C. COSMA, THOMAS S

Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. **C 0 0 3 8 8 1 8 1**

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Primary General Other (specify) Aggregate Year-to-Date **6 3 8 0**

Date of Receipt
0 4 / 0 8 / 2 0 1 4

Amount of Each Receipt this Period
6 3 8 0

SUBTOTAL of Receipts This Page (optional)..... **3 9 2 6 8**

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

FORM 1120-10-09

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 18	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
13	14	15
		<input type="checkbox"/> 12
		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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. FALANGA, STEVEN V		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 6380
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		Amount of Each Receipt this Period 6380
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6380	

Full Name (Last, First, Middle Initial) B. HARRINGTON III, CHARLES J		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 7009
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		Amount of Each Receipt this Period 7009
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7009	

Full Name (Last, First, Middle Initial) C. HUGHES, PATRICK		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 6921
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		Amount of Each Receipt this Period 6921
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6921	

SUBTOTAL of Receipts This Page (optional).....	20310
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 6 OF 8
	<input checked="" type="checkbox"/> 11a 13 <input type="checkbox"/> 11b 14 <input type="checkbox"/> 11c 15 <input type="checkbox"/> 12 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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. IUSO, ANGELA A		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 5930
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5930	

Full Name (Last, First, Middle Initial) B. JUDGE, BRENDAN		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 7011
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7011	

Full Name (Last, First, Middle Initial) C. MCCANN, W. NEVINS		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 7280
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7280	

SUBTOTAL of Receipts This Page (optional).....▶	20221
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 7 OF 18	
	(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"/> 15
<input type="checkbox"/> 12	<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)
CONNELL FOLEY PAC

A. MCHENRY, JONATHAN P

Full Name (Last, First, Middle Initial)
Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 7 0 1 0

Date of Receipt
0 4 / 0 8 / 2 0 1 4

Amount of Each Receipt this Period
7 0 1 0

B. O'REILLY, TRICIA

Full Name (Last, First, Middle Initial)
Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 7 3 6 8

Date of Receipt
0 4 / 0 8 / 2 0 1 4

Amount of Each Receipt this Period
7 3 6 8

C. PAINTER-RANDALL, KAREN L

Full Name (Last, First, Middle Initial)
Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 7 3 6 8

Date of Receipt
0 4 / 0 8 / 2 0 1 4

Amount of Each Receipt this Period
7 3 6 8

SUBTOTAL of Receipts This Page (optional)..... ▶ 2 1 7 4 8

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

FORM 101-10-1-03

**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 18
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. RYAN, ROBERT E		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 10964
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		Aggregate Year-to-Date 10964
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. SHALIT, BRAD D		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 7009
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		Aggregate Year-to-Date 7009
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. SMITH, PETER J		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 6291
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		Aggregate Year-to-Date 6291
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	24264
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. STELLER, BRIAN G		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 6 2 3 6
City	State Zip Code	
ROSELAND, NJ 07068-3702		
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6 2 3 6	

Full Name (Last, First, Middle Initial) B. MCAULEY, PATRICK J		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 6 2 9 2
City	State Zip Code	
ROSELAND, NJ 07068-3702		
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6 2 9 2	

Full Name (Last, First, Middle Initial) C. CROWLEY, MICHAEL		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 7 9 1 0
City	State Zip Code	
ROSELAND, NJ 07068-3702		
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7 9 1 0	

SUBTOTAL of Receipts This Page (optional).....▶	2 0 4 3 8
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 10 OF 18

(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
CONNELL FOLEY PAC

A. CROMIE, JOHN D

Full Name (Last, First, Middle Initial)
 Mailing Address
 85 LIVINGSTON AVENUE
 City State Zip Code
 ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer CONNELL FOLEY, LLP Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 4 7 5 0 7

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period
 3 6 5 4 4

B. GARDNER, KEVIN R

Full Name (Last, First, Middle Initial)
 Mailing Address
 85 LIVINGSTON AVENUE
 City State Zip Code
 ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer CONNELL FOLEY, LLP Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 8 5 6 6 7

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period
 6 5 8 9 8

C. LACEY, JOHN P

Full Name (Last, First, Middle Initial)
 Mailing Address
 85 LIVINGSTON AVENUE
 City State Zip Code
 ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer CONNELL FOLEY, LLP Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 4 1 6 6 9

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period
 3 2 0 5 3

SUBTOTAL of Receipts This Page (optional).....▶ 1 3 4 4 9 5

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 11 OF 18
(check only one)
 11a 13 11b 14 11c 15 12 16 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)
CONNELL FOLEY PAC

A. MCBRIDE, MICHAEL X

Full Name (Last, First, Middle Initial)
Mailing Address
85 LIVINGSTON AVENUE
City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 6 0 3 6 3

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period
4 6 4 3 3

B. MCCANN, JAMES C

Full Name (Last, First, Middle Initial)
Mailing Address
85 LIVINGSTON AVENUE
City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4 9 4 5 5

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period
3 8 0 4 2

C. MCGOVERN, PHILIP F

Full Name (Last, First, Middle Initial)
Mailing Address
85 LIVINGSTON AVENUE
City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5 8 4 1 0

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period
4 4 9 3 1

SUBTOTAL of Receipts This Page (optional).....▶ 1 2 9 4 0 6

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 12 OF 18	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
13	14	15
		<input type="checkbox"/> 12
		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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. MORYAN, JEFFREY W		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 32057
City ROSELAND, NJ	State Zip Code 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 41674	

Full Name (Last, First, Middle Initial) B. PIZZI, PETER J		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 37140
City ROSELAND, NJ	State Zip Code 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 48282	

Full Name (Last, First, Middle Initial) C. VITIELLO, ANTHONY F		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 56013
City ROSELAND, NJ	State Zip Code 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 72817	

SUBTOTAL of Receipts This Page (optional).....▶	125210
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 3 OF 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. WALSH, LIZA M		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 88358
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		Aggregate Year-to-Date 114865
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. CORRISTON, TIMOTHY M		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 21270
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		Aggregate Year-to-Date 27651
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. COSMA, THOMAS S		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 21268
City	State Zip Code ROSELAND, NJ 07068-3702	
FEC ID number of contributing federal political committee. C 00388181		Aggregate Year-to-Date 27648
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	130896
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 4 OF 18	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
13	14	15
<input type="checkbox"/> 12	<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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. FALANGA, STEVEN V		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 21268
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 00388181		Aggregate Year-to-Date 27648
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. HARRINGTON III, CHARLES J		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 23363
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 00388181		Aggregate Year-to-Date 30372
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. HUGHES, PATRICK		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 23069
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 00388181		Aggregate Year-to-Date 29990
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	67700
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 **16** OF **18**
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
CONNELL FOLEY PAC

A. MCHENRY, JONATHAN P
 Full Name (Last, First, Middle Initial)
 Mailing Address
 85 LIVINGSTON AVENUE
 City State Zip Code
 ROSELAND, NJ 07068-3702
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 1 4
 Amount of Each Receipt this Period
 2 3 3 6 5
 FEC ID number of contributing federal political committee.
 C 0 0 3 8 8 1 8 1
 Name of Employer Occupation
 CONNELL FOLEY, LLP ATTORNEY
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) Other (specify) 3 0 3 7 5

B. O'REILLY, TRICIA
 Full Name (Last, First, Middle Initial)
 Mailing Address
 85 LIVINGSTON AVENUE
 City State Zip Code
 ROSELAND, NJ 07068-3702
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 1 4
 Amount of Each Receipt this Period
 2 4 5 6 1
 FEC ID number of contributing federal political committee.
 C 0 0 3 8 8 1 8 1
 Name of Employer Occupation
 CONNELL FOLEY, LLP ATTORNEY
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) Other (specify) 3 1 9 2 9

C. PAINTER-RANDALL, KAREN L
 Full Name (Last, First, Middle Initial)
 Mailing Address
 85 LIVINGSTON AVENUE
 City State Zip Code
 ROSELAND, NJ 07068-3702
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 1 4
 Amount of Each Receipt this Period
 2 4 5 6 1
 FEC ID number of contributing federal political committee.
 C 0 0 3 8 8 1 8 1
 Name of Employer Occupation
 CONNELL FOLEY, LLP ATTORNEY
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) Other (specify) 3 1 9 2 9

SUBTOTAL of Receipts This Page (optional)..... **7 2 4 8 7**
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 17 OF 18

(check only one)

11a 11b 11c 12
13 14 15 16 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)

CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial)

A. RYAN, ROBERT E

Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4 7 5 0 9

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period

3 6 5 4 5

Full Name (Last, First, Middle Initial)

B. SHALIT, BRAD D

Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3 0 3 7 2

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period

2 3 3 6 3

Full Name (Last, First, Middle Initial)

C. SMITH, PETER J

Mailing Address
85 LIVINGSTON AVENUE

City State Zip Code
ROSELAND, NJ 07068-3702

FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1

Name of Employer Occupation
CONNELL FOLEY, LLP ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2 7 2 6 0

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 4

Amount of Each Receipt this Period

2 0 9 6 9

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

8 0 8 7 7

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 8	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. STELLER, BRIAN G		Date of Receipt MM/DD/YYYY 06/25/2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 20788
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 27024	

Full Name (Last, First, Middle Initial) B. MCAULEY, PATRICK J		Date of Receipt MM/DD/YYYY 06/25/2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 20973
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 27265	

Full Name (Last, First, Middle Initial) C. CROWLEY, MICHAEL		Date of Receipt MM/DD/YYYY 06/25/2014
Mailing Address 85 LIVINGSTON AVENUE		Amount of Each Receipt this Period 26366
City ROSELAND, NJ 07068-3702	State Zip Code	
FEC ID number of contributing federal political committee. C 0 0 3 8 8 1 8 1		
Name of Employer CONNELL FOLEY, LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 34276	

SUBTOTAL of Receipts This Page (optional).....▶	68127
TOTAL This Period (last page this line number only).....▶	1139580

**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)							PAGE 1 OF 1
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. BANK OF AMERICA		M M / D D / Y Y Y Y Y Y 0 6 / 3 0 / 2 0 1 4	
Mailing Address 65 EAGLE ROCK AVENUE			
City ROSELAND	State NJ	Zip Code 07068	
Purpose of Disbursement BANK MAINTENANCE CHARGE		Amount of Each Disbursement this Period	
Candidate Name		0 0 1 . 5 3 0 0	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ MAINTENANCE CHARGE	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	5 3 0 0
TOTAL This Period (last page this line number only).....	5 3 0 0

**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)						PAGE 1 OF 1	
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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

NAME OF COMMITTEE (In Full)
CONNELL FOLEY PAC

Full Name (Last, First, Middle Initial) A. MENENDEZ FOR SENATE		Date of Disbursement 04 / 08 / 2014
Mailing Address P.O. BOX 32248		Amount of Each Disbursement this Period 260000
City NEWARK	State NJ	
Zip Code 07102		Amount of Each Disbursement this Period 260000
Purpose of Disbursement POLITICAL CONTRIBUTION		
Candidate Name BOB MENENDEZ		Amount of Each Disbursement this Period 260000
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ANNUAL EVENING		
State:	District:	

Full Name (Last, First, Middle Initial) B. CORY BOOKER FOR SENATE		Date of Disbursement 06 / 25 / 2014
Mailing Address P.O. BOX 32237		Amount of Each Disbursement this Period 1000000
City NEWARK, NJ 07068	State NJ	
Zip Code 07068		Amount of Each Disbursement this Period 1000000
Purpose of Disbursement POLITICAL CONTRIBUTION		
Candidate Name CORY BOOKER		Amount of Each Disbursement this Period 1000000
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RECEPTION		
State:	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State	
Zip Code		
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) RECEPTION		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1260000
TOTAL This Period (last page this line number only).....	1260000

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date
7/10/14
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

BB
PREPARER
(8/2013)

7/11/14
DATE PREPARED