

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **1100 VALLEY BROOK AVE**  
Check if different than previously reported. (ACC) **LYNDHURST NJ 07071**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00571554** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  **11** /  **06** /  **2018** in the State of  **NJ**

5. Covering Period  **10** /  **01** /  **2018** through  **11** /  **26** /  **2018**

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 **Scarinci, Donald, , ,**

Signature of Treasurer **Scarinci, Donald, , ,** [Electronically Filed] Date  **12** /  **04** /  **2018**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**LEADERSHIP ALLIANCE**

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="2018"/>	<input type="text"/>	<input type="text" value="6759.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17457.44"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="413500.00"/>	<input type="text" value="1845550.00"/>
(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="430957.44"/>	<input type="text" value="1852309.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="405305.00"/>	<input type="text" value="1826657.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="25652.44"/>	<input type="text" value="25652.44"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LEADERSHIP ALLIANCE**

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).....	360000.00	1497050.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	360000.00	1497050.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	53500.00	203500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	413500.00	1700550.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	145000.00
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.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	413500.00	1845550.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	413500.00	1845550.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	35305.00	111657.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35305.00	111657.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	130000.00	130000.00
24. Independent Expenditures (use Schedule E) .....	240000.00	1440000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	145000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	405305.00	1826657.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	405305.00	1826657.50

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	413500.00	1700550.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	413500.00	1700550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	35305.00	111657.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35305.00	111657.50

**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 15
<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

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)  
**LEADERSHIP ALLIANCE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Barr, Edward, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 29 / 2018
Mailing Address 26110 Mandevilla Dr.		<b>Transaction ID : SA11AI.4249</b>
City Bonita Springs	State FL	Zip Code 34134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Investor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Barry, David, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 30 / 2018
Mailing Address 50 Washington Street		<b>Transaction ID : SA11AI.4250</b>
City Hoboken	State NJ	Zip Code 07030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100000.00
Name of Employer (for Individual) Ironstate Development	Occupation (for Individual) Developer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Barsoom, Peter, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 24 / 2018
Mailing Address 3511 Tejon St		<b>Transaction ID : SA11AI.4245</b>
City Denver	State CO	Zip Code 80211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20000.00
Name of Employer (for Individual) Nuka Enterprises	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 20000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	145000.00
<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 7 OF 15
	<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)  
**LEADERSHIP ALLIANCE**

**A. Cooper, Milton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Red Ground Rd  
 City Old Westbury State NY Zip Code 11568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kimco Realty Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : SA11AI.4240**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**B. Federated Investors**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1001 Liberty Avenue  
 City Pittsburgh State PA Zip Code 15222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 22 / 2018  
**Transaction ID : SA11AI.4243**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**C. Guy, Craig, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 Avenue B  
 City Bayonne State NJ Zip Code 07002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Voters Project Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 11 / 02 / 2018  
**Transaction ID : SA11AI.4255**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75000.00
<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 8 OF 15
	<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)  
**LEADERSHIP ALLIANCE**

**A. Harris, Marjorie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 859 Park Ave  
 City New York State NY Zip Code 10075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Requested Occupation (for Individual) Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 02 / 2018  
**Transaction ID : SA11AI.4239**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**B. National Air Traffic Controllers**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1325 Massachusetts Ave, NW  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Requested Occupation (for Individual) Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 26 / 2018  
**Transaction ID : SA11AI.4247**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**C. Schusterman, Stacy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 699  
 City Tulsa State OK Zip Code 74101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Samson Energy Company Occupation (for Individual) Chair  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200000.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : SA11AI.4242**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140000.00
<b>TOTAL</b> This Period (last page this line number only).....	360000.00



**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 9 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**LEADERSHIP ALLIANCE**

**A. NATIONAL CONSUMER CREDIT ACCESS SUPER PAC, INC.**

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

Mailing Address 100 CANAL POINTE BLVD  
SUITE 208

City PRINCETON State NJ Zip Code 08540

FEC ID number of contributing federal political committee. **C** C00690297

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
43500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 01 / 2018

**Transaction ID : SA11C.4252**

Amount of Each Receipt this Period  
43500.00

Memo Item

**B. NATIONAL CONSUMER CREDIT ACCESS SUPER PAC, INC.**

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

Mailing Address 100 CANAL POINTE BLVD  
SUITE 208

City PRINCETON State NJ Zip Code 08540

FEC ID number of contributing federal political committee. **C** C00690297

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
53500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 02 / 2018

**Transaction ID : SA11C.4254**

Amount of Each Receipt this Period  
10000.00

Memo Item

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	53500.00
<b>TOTAL</b> This Period (last page this line number only).....	53500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LEADERSHIP ALLIANCE**

Full Name (Last, First, Middle Initial)

### A. Comprehensive Communications Group

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Mailing Address 58 Main Street

FEC Identification Number

C [ ]

**Transaction ID : SB21B.4238**

Amount of Each Disbursement this Period

[ ] 1500.00

Memo Item

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement  
Strategic Consulting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

### B. ConnectOneBank

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

Mailing Address 301 Sylvan Avenue

FEC Identification Number

C [ ]

**Transaction ID : SB21B.4227**

Amount of Each Disbursement this Period

[ ] 25.00

Memo Item

City Englewood Cliffs State NJ Zip Code 07632

Purpose of Disbursement  
Bank Charges

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

### C. ConnectOneBank

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

Mailing Address 301 Sylvan Avenue

FEC Identification Number

C [ ]

**Transaction ID : SB21B.4257**

Amount of Each Disbursement this Period

[ ] 25.00

Memo Item

City Englewood Cliffs State NJ Zip Code 07632

Purpose of Disbursement  
Bank Charges

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

[ ] 1550.00

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LEADERSHIP ALLIANCE**

Full Name (Last, First, Middle Initial) <b>A. Moeller, Peter, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 06 / 2018
Mailing Address 321 Spring St Unit 24		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4234</b> Amount of Each Disbursement this Period [ ] 1000.00
City Red Bank	State NJ	Zip Code 07701
Purpose of Disbursement Internet Consulting		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Sandler, Reiff, Lamb, Rosenstein &amp; Birkenstock, PC</b>		Date of Disbursement MM / DD / YYYY 10 / 26 / 2018
Mailing Address 1025 Vermont Ave, NW		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4232</b> Amount of Each Disbursement this Period [ ] 7680.00
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Legal Services		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Scelia, Alexandra, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 06 / 2018
Mailing Address 624 Park Ave 3C		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4236</b> Amount of Each Disbursement this Period [ ] 2500.00
City Hoboken	State NJ	Zip Code 07030
Purpose of Disbursement Management Consulting		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 11180.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LEADERSHIP ALLIANCE**

**A. Smart Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 8 Rock Wall Lane

City Cape Elizabeth State ME Zip Code 04107

Purpose of Disbursement Research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 05 / 2018

FEC Identification Number: C  
Transaction ID : SB21B.4233  
Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. Targetsmart**

Full Name (Last, First, Middle Initial)  
Mailing Address 1155 15th Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Polling

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 26 / 2018

FEC Identification Number: C  
Transaction ID : SB21B.4231  
Amount of Each Disbursement this Period: 21000.00

Memo Item

**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: MM / DD / YYYY

FEC Identification Number: C  
Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	22500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	35230.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**LEADERSHIP ALLIANCE**

Full Name (Last, First, Middle Initial)

**A. SMP**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 29 / 2018

FEC Identification Number

C  C00484642

**Transaction ID : SB23.4228**

Amount of Each Disbursement this Period

100000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SMP**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 31 / 2018

FEC Identification Number

C  C00484642

**Transaction ID : SB23.4230**

Amount of Each Disbursement this Period

30000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

130000.00

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

130000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LEADERSHIP ALLIANCE
FEC IDENTIFICATION NUMBER C C00571554

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Ethica Media LLC
Mailing Address 1225 Franklin Ave Suite 325
City Garden City State NY Zip Code 11530
Purpose of Expenditure Radio Ad/Production Category/Type

Date of Public Distribution/Dissemination 10/30/2018
Amount 100000.00
Transaction ID: SE.4209
Date of Disbursement or Obligation 10/29/2018

Name of Federal Candidate: MENENDEZ, ROBERT, ,
Support Oppose
Office Sought: House Senate State: NJ

Disbursement For: Primary General 2018 Other (specify)

Calendar Year-To-Date Per Election for Office Sought 1300000.00

Full Name of Payee Ethica Media LLC
Mailing Address 1225 Franklin Ave Suite 325
City Garden City State NY Zip Code 11530
Purpose of Expenditure Radio Ad/Production Category/Type

Date of Public Distribution/Dissemination 10/30/2018
Amount 70000.00
Transaction ID: SE.4215
Date of Disbursement or Obligation 10/31/2018

Name of Federal Candidate: MENENDEZ, ROBERT, ,
Support Oppose
Office Sought: House Senate State: NJ

Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 170000.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Scarinci, Donald, , [Electronically Filed] Date 12/04/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LEADERSHIP ALLIANCE
FEC IDENTIFICATION NUMBER C C00571554

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Ethica Media LLC
Mailing Address 1225 Franklin Ave Suite 325
City Garden City State NY Zip Code 11530
Purpose of Expenditure Radio Ad/Production
Date of Public Distribution/Dissemination 11/02/2018
Amount 70000.00
Transaction ID: SE.4218
Date of Disbursement or Obligation 11/02/2018

Name of Federal Candidate: MENENDEZ, ROBERT, ,
Support Oppose
Office Sought: House Senate State: NJ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 70000.00; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 240000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Scarinci, Donald, ,

[Electronically Filed]

Date

12/04/2018

Signature