

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER

2009 JAN 16 PM 3:56

Office Use Only

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

Connell, Florely, PAC

ADDRESS (number and street) 85 Livingston Avenue

Check if different than previously reported. (ACC) R o s e l a n d N J 07068 - 37012

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

C 00388181

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 MM / DD / YYYY in the State of

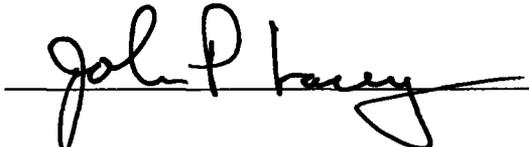
- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on MM / DD / YYYY in the State of

5. Covering Period 10 / 01 / 2008 through 12 / 31 / 2008

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 01 / 14 / 2009

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							
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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:

1 0 / 0 1 / 2 0 0 8

To:

1 2 / 3 1 / 2 0 0 8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2 0 0 8		712.94
(b) Cash on Hand at Beginning of Reporting Period.....	736.94	
(c) Total Receipts (from Line 19).....	0.00	7,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	736.94	7,712.94
7. Total Disbursements (from Line 31).....	506.00	7,482.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	230.94	230.94
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. 02/2003)

Page 3

Write or Type Committee Name

Connell Foley PAC

Report Covering the Period: From:

10 / 01 / 2008

To:

12 / 31 / 2008

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0.00

3,007.99

(ii) Unitemized

0.00

3,992.01

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

0.00

7,000.00

(b) Political Party Committees

0.00

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

0.00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0.00

7,000.00

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.).....

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)).....▶

0.00

7,000.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0.00

7,000.00

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	506.00	2,482.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	506.00	2,482.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	5,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
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).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
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))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	506.00	7,482.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	506.00	7,482.00

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)	0.00	7,000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	7,000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	506.00	2,482.00
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	506.00	2,482.00

20250923202

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 5	
	(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

Full Name (Last, First, Middle Initial)
A. McBride, Michael

Mailing Address
85 Livingston Avenue

City **Roseland, New Jersey 07068** State Zip Code

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

Name of Employer **Connell Foley, LLP** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **294.07**

Date of Receipt
 / /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
B. Bennett, John K.

Mailing Address
85 Livingston Avenue

City **Roseland, New Jersey 07068** State Zip Code

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

Name of Employer **Connell Foley, LLP** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **259.80**

Date of Receipt
 / /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
c. Coakley, Kevin J.

Mailing Address
85 Livingston Avenue

City **Roseland, New Jersey 07068** State Zip Code

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

Name of Employer **Connell Foley, LLP** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **363.10**

Date of Receipt
 / /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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

1076699-001

**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 5

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)
Connell Foley PAC

Full Name (Last, First, Middle Initial)
A. McGovern, Philip F.

Mailing Address
85 Livingston Avenue

City **Roseland, New Jersey** State Zip Code **07068**

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

Name of Employer **Connell Foley, LLP** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **286.70**

Date of Receipt
 / /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
B. McNally, Daren S.

Mailing Address
85 Livingston Avenue

City **Roseland, New Jersey** State Zip Code **07068**

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

Name of Employer **Connell Foley, LLP** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **323.18**

Date of Receipt
 / /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
c. Moryan, Jeffrey W.

Mailing Address
85 Livingston Avenue

City **Roseland, New Jersey** State Zip Code **07068**

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

Name of Employer **Connell Foley, LLP** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **268.27**

Date of Receipt
 / /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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

1074 0000 0000 0000

**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 5				
	<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		

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NAME OF COMMITTEE (In Full)
Connell Foley PAC

Full Name (Last, First, Middle Initial) A. Pizzi, Peter J.		Date of Receipt MM / DD / YYYY
Mailing Address 85 Livingston Avenue		Amount of Each Receipt this Period
City Roseland, New Jersey	State Zip Code 07068	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 244.65
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 ▼ 244.65	

Full Name (Last, First, Middle Initial) B. O'Hara, Jeffrey L.		Date of Receipt MM / DD / YYYY
Mailing Address 85 Livingston Avenue		Amount of Each Receipt this Period
City Roseland, New Jersey	State Zip Code 07068	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 289.18
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 ▼ 289.18	

Full Name (Last, First, Middle Initial) C. Ryan, Robert E.		Date of Receipt MM / DD / YYYY
Mailing Address 85 Livingston Avenue		Amount of Each Receipt this Period
City Roseland, New Jersey	State Zip Code 07068	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 267.75
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 ▼ 267.75	

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

50756666087

**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 5

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)
Connell Foley PAC

Full Name (Last, First, Middle Initial) A. Walsh, Liza M.		Date of Receipt [] / [] / []
Mailing Address 85 Livingston Avenue		Amount of Each Receipt this Period []
City Roseland, New Jersey 07068	State Zip Code	
FEC ID number of contributing federal political committee. C []		Amount of Each Receipt this Period []
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 ▼ [] 280.71	

Full Name (Last, First, Middle Initial) B. Vitiello, Anthony F.		Date of Receipt [] / [] / []
Mailing Address 85 Livingston Avenue		Amount of Each Receipt this Period []
City Roseland, New Jersey 07068	State Zip Code	
FEC ID number of contributing federal political committee. C []		Amount of Each Receipt this Period []
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 ▼ [] 252.32	

Full Name (Last, First, Middle Initial) C. Lacey, John F.		Date of Receipt [] / [] / []
Mailing Address 85 Livingston Avenue		Amount of Each Receipt this Period []
City Roseland, New Jersey 07068	State Zip Code	
FEC ID number of contributing federal political committee. C []		Amount of Each Receipt this Period []
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 ▼ [] 224.04	

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

201703031007

**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 5	
	(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

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NAME OF COMMITTEE (In Full)
Connell Foley PAC

Full Name (Last, First, Middle Initial) A. Gardner, Kevin R.		Date of Receipt MM / DD / YYYY
Mailing Address 85 Livingston Avenue		Amount of Each Receipt this Period
City Roseland, New Jersey 07068	State Zip Code	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 213.13
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. Cromie, John D.		Date of Receipt MM / DD / YYYY
Mailing Address 85 Livingston Avenue		Amount of Each Receipt this Period
City Roseland, New Jersey 07068	State Zip Code	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 215.66
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.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

107E8867087

**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	<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

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. Bank of America

Mailing Address
165 Eagle Rock Avenue

City **Roseland, NJ** State Zip Code **07068**

Purpose of Disbursement
Bank Maintenance Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2008

Amount of Each Disbursement this Period

48.00

Category/Type

B. Moore Stephens, P.C.

Mailing Address
340 North Avenue

City **Cranford, New Jersey** State Zip Code **07016**

Purpose of Disbursement
Accounting Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2008

Amount of Each Disbursement this Period

458.00

Category/Type

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).....▶

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

506.00

506.00

407584109

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
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Exp* Shipping Date
1/15/09
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

JMA
PREPARER

1/21/09
DATE PREPARED

200708081209