

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT** ▼Example: If typing, type  
over the lines

NORPAC

ADDRESS (number and street)

PO Box 5595

☐Check if different  
than previously  
reported. (ACC)

Englewood

NJ

07631

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00247403

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  
Quarterly 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 (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2008

through

03

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

Joel Davidson

Signature of Treasurer

Electronically Filed by Joel Davidson

Date

04

25

2008

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  
NORPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		490808.66
(b) Cash on Hand at Beginning of Reporting Period .....	515174.52	
(c) Total Receipts (from Line 19) .....	92470.36	161717.97
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	607644.88	652526.63
7. Total Disbursements (from Line 31) .....	40162.85	85044.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	567482.03	567482.03
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NORPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

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	63450.00	119385.00
(i) Itemized (use Schedule A) .....	28115.00	36773.00
(ii) Unitemized .....	91565.00	156158.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	91565.00	156158.00
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	44.10
17. Other Federal Receipts (Dividends, Interest, etc.) .....	905.36	5515.87
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 Transfer (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)) .....	92470.36	161717.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	92470.36	161717.97

**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) Shared 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.....	16087.85	43785.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	16087.85	43785.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23000.00	39809.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1075.00	1450.00
(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)) .....	1075.00	1450.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	40162.85	85044.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40162.85	85044.60

**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) .....	91565.00	156158.00
34. Total Contribution Refunds (from Line 28(d)) .....	1075.00	1450.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	90490.00	154708.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16087.85	43785.60
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16087.85	43785.60

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

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

FOR LINE NUMBER: PAGE 6 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Carmi Abramowitz

Mailing Address 77 Lee Place

City

Bergenfield

State

NJ

Zip Code

07621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pfizer

Occupation

Business Tech

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.20992

Amount of Each Receipt this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)

Gary Adler

Mailing Address 1116 Magnolia Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADP

Occupation

Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21193

Amount of Each Receipt this Period

275.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Antsis

Mailing Address 32 Brookfall Road

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21243

Amount of Each Receipt this Period

275.00

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

775.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 72

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

**A.**

Full Name (Last, First, Middle Initial)  
**Drora Arussy**

Mailing Address **23 Chittenden Road**

City State Zip Code  
**Fair Lawn NJ 07410**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Drew University**

Occupation  
**Education**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 14 / 2008**

**Transaction ID: SA11AI.21192**

Amount of Each Receipt this Period

**300.00**

**B.**

Full Name (Last, First, Middle Initial)  
**Laurie Baumel**

Mailing Address **797 Winthrop Rd.**

City State Zip Code  
**Teaneck NJ 07666**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**none**

Occupation  
**Housewife**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**450.00**

Date of Receipt

**03 / 01 / 2008**

**Transaction ID: SA11AI.20980**

Amount of Each Receipt this Period

**75.00**

**C.**

Full Name (Last, First, Middle Initial)  
**Deborah Berger**

Mailing Address **24 Sutton Pl**

City State Zip Code  
**Englewood NJ 07631**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Alan W. Berger, MD**

Occupation  
**Office Manager**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**.00**

Date of Receipt

**03 / 10 / 2008**

**Transaction ID: SA11AI.21354**

Amount of Each Receipt this Period

**300.00**

check to Roberts for Sena-  
te

**[MEMO ITEM]**

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

**375.00**

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Helene Berkowitz

Mailing Address 232 South Dwight Place

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Speech Pathologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21038

Amount of Each Receipt this Period

375.00

**B.**

Full Name (Last, First, Middle Initial)

David Blady

Mailing Address 6 Jagger Ct.

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Neurological Consultants,  
PA

Occupation

MD

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.20964

Amount of Each Receipt this Period

275.00

**C.**

Full Name (Last, First, Middle Initial)

Maurice Bortz

Mailing Address 64 Meadow Dr.

City

Woodmere

State

NY

Zip Code

11598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IDT

Occupation

Business Developer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.21311

Amount of Each Receipt this Period

275.00

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

925.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Marcie Cappell

Mailing Address 100 Riverside Drive

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21221

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Ephraim Casper

Mailing Address 1681 Buckingham Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Memorial Sloan Kettering  
Cancer Ctr

Occupation

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.21325

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Ben Chouake

Mailing Address 245 Hutchinson Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

MD

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.21372

Amount of Each Receipt this Period

1500.00

credit card to Friends of  
Mark Warner

[MEMO ITEM]

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

550.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Loren Daitch

Mailing Address 2339 Lindenmere Drive

City

Merrick

State

NY

Zip Code

11566

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21177

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Shmuel Davidovics

Mailing Address 285 Fountain Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HASC Center

Occupation

Computer Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21080

Amount of Each Receipt this Period

325.00

**C.**

Full Name (Last, First, Middle Initial)

Naomi Davis

Mailing Address 4 Copper Beach Lane

City

Lawrence

State

NY

Zip Code

11559

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21213

Amount of Each Receipt this Period

300.00

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

700.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Lawrence Diener

Mailing Address 293 E. Palisade Avenue

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.20912

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Lawrence Diener

Mailing Address 293 E. Palisade Avenue

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21114

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Julie Farkas

Mailing Address 289 New Bridge Rd.

City

Bergenfield

State

NJ

Zip Code

07621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hadassah

Occupation  
Art Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.21303

Amount of Each Receipt this Period

275.00

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

1400.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Hershel Feldman

Mailing Address 250 Hutchinson Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Macabee Trading

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21163

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Fialkoff

Mailing Address 1203 Geiger Lane

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.21300

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mort Fridman

Mailing Address 826 Winthrop Rd

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.21358

Amount of Each Receipt this Period

500.00

credit card to Roberts for  
Senate

[MEMO ITEM]

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Allen Friedman

Mailing Address 315 Johnson Avenue

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J.P. Morgan Chase

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.21020

Amount of Each Receipt this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)

Allen Friedman

Mailing Address 315 Johnson Avenue

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J.P. Morgan Chase

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.20950

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Jerald Friedman

Mailing Address 1626 Buckingham Rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Oral surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.21296

Amount of Each Receipt this Period

350.00

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Karen Futter

Mailing Address 720 Downing St.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21205

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Laurence Garber

Mailing Address 922 Mayfield Road

City

Woodmere

State

NY

Zip Code

11598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Businessman

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.21332

Amount of Each Receipt this Period

350.00

**C.**

Full Name (Last, First, Middle Initial)

Leon Glaser

Mailing Address 15 Barlow Rd

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT & T

Occupation

Sales Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21098

Amount of Each Receipt this Period

250.00

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

875.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Margie Glatt

Mailing Address 1035 Hazel Place

City

Woodmere

State

NY

Zip Code

11598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sutton Land

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21032

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Felix Glaubach

Mailing Address 5 Lighthouse Rd

City

Kings Point

State

NY

Zip Code

11024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Personal Touch Homecare

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21378

Amount of Each Receipt this Period

2300.00

check to John McCain 2008

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Felix Glaubach

Mailing Address 5 Lighthouse Rd

City

Kings Point

State

NY

Zip Code

11024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Personal Touch Homecare

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21379

Amount of Each Receipt this Period

1300.00

check to John McCain 2008

[MEMO ITEM]

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

275.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Miriam Glaubach

Mailing Address 5 Lighthouse Road

City

Kings Point

State

NY

Zip Code

11024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Personal Touch Homecare

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21380

Amount of Each Receipt this Period

2300.00

check to John McCain 2008

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Miriam Glaubach

Mailing Address 5 Lighthouse Road

City

Kings Point

State

NY

Zip Code

11024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Personal Touch Homecare

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21382

Amount of Each Receipt this Period

2500.00

check to John McCain 2008

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Paul J. Goodnick

Mailing Address 123 S Adelaide Ave  
4E

City

Highland Park

State

NJ

Zip Code

08904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carrier Clinic

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.20918

Amount of Each Receipt this Period

1000.00

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

1000.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Robert M. Gottesman

Mailing Address 285 Sunset Avenue

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21383

Amount of Each Receipt this Period

1000.00

check to John McCain 2008

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Sidney Gottesman

Mailing Address 1219 Sussex Rd

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Citicorp

Occupation  
Best Efforts Used to Obtain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21104

Amount of Each Receipt this Period

275.00

**C.**

Full Name (Last, First, Middle Initial)

Kenneth Greif

Mailing Address 240 Maple St.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Venture Capitalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.20963

Amount of Each Receipt this Period

1000.00

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

1275.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Jack Halpern

Mailing Address 160 W. 66th St.

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Atlantic Realty

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21377

Amount of Each Receipt this Period

2000.00

check to Friends of Mark  
Warner

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Jack Halpern

Mailing Address 160 W. 66th St.

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Atlantic Realty

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.20919

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Lieba Halpern

Mailing Address 160 W. 66 St.

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.20920

Amount of Each Receipt this Period

5000.00

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

10000.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Marc Hanfling

Mailing Address 47 Leslie St.

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.21299

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)

Debbie Haramati

Mailing Address 1195 The Strand

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Interior Design

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21160

Amount of Each Receipt this Period

275.00

**C.**

Full Name (Last, First, Middle Initial)

Hinda Hausdorff

Mailing Address 441 W. Englewood Avenue

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21155

Amount of Each Receipt this Period

250.00

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Sam Heller

Mailing Address 7-07 Fair Haven Pl

City

Fair Lawn

State

NJ

Zip Code

07410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21024

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Peter Hercky

Mailing Address 1822 Middle Rd.

City

Martinsville

State

NJ

Zip Code

08836

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hercky Pasqua Herman

Occupation

Ad Agency Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.20996

Amount of Each Receipt this Period

325.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Hirsch

Mailing Address 280 Old Somerset Rd

City

Watchung

State

NJ

Zip Code

07069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TIAA-CREF

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.20943

Amount of Each Receipt this Period

250.00

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

825.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey Hochberg

Mailing Address 23 Hampton Court

City

Bergenfield

State

NJ

Zip Code

07621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sullivan & Cromwell

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.20936

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Avi Hochstein

Mailing Address 446 Churchill Rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.21061

Amount of Each Receipt this Period

375.00

**C.**

Full Name (Last, First, Middle Initial)

Jacqueline Horowitz

Mailing Address 326 Winthrop Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21199

Amount of Each Receipt this Period

275.00

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

1650.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Moshe Kadry

Mailing Address 541 Halevy Dr.

City

Cedarhurst

State

NY

Zip Code

11516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMES Systems Ltd.

Occupation

Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21228

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Esti Kaminetsky

Mailing Address 786 Downing St

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Learning Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21157

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Kaplan

Mailing Address 6 Opatut Ct.

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
S&P

Occupation

Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21134

Amount of Each Receipt this Period

250.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Brian Katz

Mailing Address 573 Winthrop Rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.21339

Amount of Each Receipt this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)

Steven Kellner

Mailing Address 16 Cedarhurst Ave

City

Cedarhurst

State

NY

Zip Code

11516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.21059

Amount of Each Receipt this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)

Seymour Kessel

Mailing Address 27 Marshall Drive

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Credit Suisse

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.20986

Amount of Each Receipt this Period

325.00

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

1375.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 72

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Aryeh Klahr

Mailing Address 90 S. Woodland St.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Industrial Med. Associates  
PCOccupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.20990

Amount of Each Receipt this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)

Lawrence Kluger

Mailing Address 35 Ellsworth Dr.

City

Warren

State

NJ

Zip Code

07059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	0	8

Transaction ID: SA11AI.20988

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Harold Kofman

Mailing Address 165 West End Ave #5m

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HalcyonOccupation  
Trader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.21073

Amount of Each Receipt this Period

375.00

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

850.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Kolatch

Mailing Address 115 Dwight Pl.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.20973

Amount of Each Receipt this Period

3750.00

**B.**

Full Name (Last, First, Middle Initial)

Mindy Kolatch

Mailing Address 115 Dwight Pl

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ramaz

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.20974

Amount of Each Receipt this Period

3750.00

**C.**

Full Name (Last, First, Middle Initial)

Leon Kozak

Mailing Address 280 Jones Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.21344

Amount of Each Receipt this Period

750.00

check to Garrett for Cong-  
ress

[MEMO ITEM]

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Rosalyn Kozak

Mailing Address 280 Jones Rd.

City

Englewood

State

NJ

Zip Code

07632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Englewood Hospital

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21353

Amount of Each Receipt this Period

1000.00

check to Roberts for Sena-  
te

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Benjamin Kropsky

Mailing Address 685 Suffern Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.20909

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Renee Kuker

Mailing Address 33 Stella Drive

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.20994

Amount of Each Receipt this Period

250.00

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

500.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 72

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Joshua Landes

Mailing Address 740 W 232nd Street

City

Riverdale

State

NY

Zip Code

10463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wynnefield Capital

Occupation

Investment Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	8

Transaction ID: SA11AI.21373

Amount of Each Receipt this Period

1000.00

credit card to Friends of  
Mark Warner**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Larry Lehman

Mailing Address 336 Edward Ave

City

Woodmere

State

NY

Zip Code

11598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	8

Transaction ID: SA11AI.20921

Amount of Each Receipt this Period

325.00

**C.**

Full Name (Last, First, Middle Initial)

Kevin Lemmer

Mailing Address 140 Downey Dr.

City

Tenafly

State

NJ

Zip Code

07670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADAR Investment Management

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.21355

Amount of Each Receipt this Period

250.00

credit card to Roberts for  
Senate**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional) .....

325.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Esther Levie

Mailing Address 814 Downing St

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21166

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Saul Levine

Mailing Address 604 Rutland Ave.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Horizon Project Advisors

Occupation  
Construction Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21138

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Syma Levine

Mailing Address 491 Bell Street

City

West Hempstead

State

NY

Zip Code

11552

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21178

Amount of Each Receipt this Period

75.00

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

425.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 72

(check only one)

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

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

NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Yaffa Liebman

Mailing Address 42 Hoover Ave

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Joseph Kushner Hebrew Aca-  
demy

Occupation

Assistant Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	0	8

Transaction ID: SA11AI.21112

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Karen Lifshitz

Mailing Address 18 White Drive

City

Cedarhurst

State

NY

Zip Code

11516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

Transaction ID: SA11AI.21144

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Lifshitz

Mailing Address 18 White Drive

City

Cedarhurst

State

NY

Zip Code

11516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

Transaction ID: SA11AI.21145

Amount of Each Receipt this Period

250.00

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Nathan J. Lindenbaum

Mailing Address 464 Winthrop Rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MGS Corp.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.21359

Amount of Each Receipt this Period

1000.00

check to Roberts for Sena-  
te

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

John Lipowski

Mailing Address PO Box 9209

City

Morristown

State

NJ

Zip Code

07963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21356

Amount of Each Receipt this Period

200.00

check to Roberts for Sena-  
te

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Fred Lisker

Mailing Address 536 Windsor Road

City

Bergenfield

State

NJ

Zip Code

07621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYC Department of Educati-  
on

Occupation  
Education Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.21312

Amount of Each Receipt this Period

225.00

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

225.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Paul Lustiger

Mailing Address 714 Carroll Place

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21031

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Marcus

Mailing Address 464 West Englewood Avenue

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Podiatrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.20941

Amount of Each Receipt this Period

325.00

**C.**

Full Name (Last, First, Middle Initial)

Hillary Markowitz

Mailing Address 14 Justin Road

City

Harrison

State

NY

Zip Code

10528

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.21016

Amount of Each Receipt this Period

250.00

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

975.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Miriam Meyer

Mailing Address 660 Evergreen Drive

City

West Hempstead

State

NY

Zip Code

11552

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
By Invitation Only

Occupation  
Printing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.21329

Amount of Each Receipt this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)

Alan Mitzner

Mailing Address 145 Glenlawn Ave

City

Sea Cliff

State

NY

Zip Code

11579

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Pie, LLC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.21318

Amount of Each Receipt this Period

725.00

**C.**

Full Name (Last, First, Middle Initial)

Milton Mitzner

Mailing Address 50 Warwick Rd.

City

Great Neck

State

NY

Zip Code

11023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.20905

Amount of Each Receipt this Period

250.00

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

1575.00

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



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

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

FOR LINE NUMBER: PAGE 33 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Linda Moed-Cohen

Mailing Address 350 N 5th Ave

City

Highland Park

State

NJ

Zip Code

08904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TABC & Camp Moshava

Occupation  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.20924

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Moerdler

Mailing Address 5 Chittendon Rd.

City

Fair Lawn

State

NJ

Zip Code

07410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MDY Advanced Technologies

Occupation  
Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.20997

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

David Moskovic

Mailing Address 22 Brookfall Road

City

Edison

State

NJ

Zip Code

08810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DTCC

Occupation  
Systems Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.21270

Amount of Each Receipt this Period

225.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Jason Muss

Mailing Address 181 East 90th

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Muss Development Corp

Occupation

Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.21361

Amount of Each Receipt this Period

1000.00

check to Roberts for Sena-  
te

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Joshua Muss

Mailing Address 11 Rutherford Lane

City

Lawrence

State

NY

Zip Code

11559

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.21360

Amount of Each Receipt this Period

1000.00

check to Roberts for Sena-  
te

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Wendy Offen

Mailing Address 244 Fairfield Lane

City

Hillsborough

State

NJ

Zip Code

08844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Klitzberg Associates

Occupation

Admin Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21141

Amount of Each Receipt this Period

250.00

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

250.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Henry Oshin

Mailing Address 462 Spruce Lane

City

East Meadow

State

NY

Zip Code

11554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.21337

Amount of Each Receipt this Period

175.00

**B.**

Full Name (Last, First, Middle Initial)

Ira Palgon

Mailing Address 286 churchill rd

City

Teaneck

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dewey Ballantine

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21046

Amount of Each Receipt this Period

225.00

**C.**

Full Name (Last, First, Middle Initial)

Rae Paltiel

Mailing Address 22 Claremont Avenue

City

Maplewood

State

NJ

Zip Code

07040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21187

Amount of Each Receipt this Period

225.00

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

625.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Drew Parker

Mailing Address 159 Maple St.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kingsbrook Investments

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21343

Amount of Each Receipt this Period

150.00

check to Garrett for Cong-  
ress

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Drew Parker

Mailing Address 159 Maple St.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kingsbrook Investments

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21236

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Allen Pfeiffer

Mailing Address 315 Warwick Ave

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Duff and Phelps

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.20928

Amount of Each Receipt this Period

250.00

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

500.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

David Plotzker

Mailing Address 1273 Dickerson rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medco Health Solutions,  
Inc.

Occupation

I.T. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21091

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Arthur Poleyeff

Mailing Address 164 Huguenot Avenue

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TABC

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.21316

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Simon Posner

Mailing Address 300 Robin Road

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Otterbourg, Steindler

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.21068

Amount of Each Receipt this Period

250.00

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

825.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Susan Presby

Mailing Address 171 Merrison Street

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fashion Institute of Amer-  
ica

Occupation  
Technologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21122

Amount of Each Receipt this Period

325.00

**B.**

Full Name (Last, First, Middle Initial)

Rachel Quint

Mailing Address 4515 Greystone

City

Fieldstone

State

NY

Zip Code

10471

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.21334

Amount of Each Receipt this Period

675.00

**C.**

Full Name (Last, First, Middle Initial)

Greg Raykher

Mailing Address 777 Dearborn St.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dresner Kleinwort &Wasser-  
stein

Occupation  
Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.20930

Amount of Each Receipt this Period

500.00

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

1500.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 72

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Alvin Reinstein

Mailing Address 250 dewey place

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYC Housing Authority

Occupation

Administrator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	8

Transaction ID: SA11AI.21085

Amount of Each Receipt this Period

325.00

**B.**

Full Name (Last, First, Middle Initial)

Gene Rosenberg

Mailing Address 507 Forest Avenue

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.20975

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Stuart Rosenberg

Mailing Address 355 Winthrop Rd

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montefiore Medical Center

Occupation

MD

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.20952

Amount of Each Receipt this Period

125.00

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

1450.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Stuart Rosenberg

Mailing Address 355 Winthrop Rd

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montefiore Medical Center

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.20954

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Phyllis Roth

Mailing Address 33 Carteret St.

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Family Eye Care

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21165

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Ruth Roth

Mailing Address 597 Rutland Ave

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Freelance Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21110

Amount of Each Receipt this Period

300.00

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

625.00

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



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

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

FOR LINE NUMBER: PAGE 41 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

David Sadek

Mailing Address 635 Norfolk Street

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
First Financial Equities

Occupation

Mortgage Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21108

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Elana Sasto

Mailing Address 3 Van Hise Court

City

East Brunswick

State

NJ

Zip Code

08816

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21102

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Regina Savitsky

Mailing Address 423 Daub Ave

City

Hewlett

State

NY

Zip Code

11557

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.20906

Amount of Each Receipt this Period

1000.00

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

1525.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 72

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Bennett Schachter

Mailing Address 43 Dover Court

City

Bergenfield

State

NJ

Zip Code

07621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Goldman SachsOccupation  
Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.20938

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Henry Schanzer

Mailing Address 29 Brookfall Road

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	0	8

Transaction ID: SA11AI.21284

Amount of Each Receipt this Period

375.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Ellen Scherl

Mailing Address 12 Stanton Rd.

City

Tenafly

State

NJ

Zip Code

07670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.20962

Amount of Each Receipt this Period

1000.00

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

1875.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Marty Schlakman

Mailing Address 200 Lyman Pl.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Psychiatry Assoc.

Occupation  
Psychiatrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21030

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

David Schlusel

Mailing Address 860 Prince St.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Key Properties

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21048

Amount of Each Receipt this Period

325.00

**C.**

Full Name (Last, First, Middle Initial)

Marc Schlusel

Mailing Address 695 Grange Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Key Properties

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.21007

Amount of Each Receipt this Period

475.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Sara Schluskel

Mailing Address 100 Lydecker St

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21094

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Martin Schneider

Mailing Address 19 Harrison St.

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Millennium Eye Care

Occupation

MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21047

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Jeffrey Schreiber

Mailing Address 208 Lincoln Ave.

City

Highland Park

State

NJ

Zip Code

08904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self (Meister Seelig & Fe-  
in)

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.21331

Amount of Each Receipt this Period

425.00

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Allan Schwartz

Mailing Address 590 Maitland Ave

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMP Networks

Occupation

VP Sales & Business Dev.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21182

Amount of Each Receipt this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)

Abe Schwartzbard

Mailing Address 9 Fairhill Road

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hewlett Packard Financial  
Serv

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.20987

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Herbert Seif

Mailing Address 251 East Linden Avenue

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Epic Asset Mgmt

Occupation

Fund Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.21347

Amount of Each Receipt this Period

1000.00

check to Reed Committee

[MEMO ITEM]

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

525.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Larry Shafier

Mailing Address 100 Cherry Lane

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Prudential

Occupation

Insurance Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21035

Amount of Each Receipt this Period

375.00

**B.**

Full Name (Last, First, Middle Initial)

Helene Sher

Mailing Address 4 Meadow Lane

City

Lawrence

State

NY

Zip Code

11559

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
best efforts used

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.21291

Amount of Each Receipt this Period

325.00

**C.**

Full Name (Last, First, Middle Initial)

Yale Shulman

Mailing Address 94 E. Linden Ave.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.21019

Amount of Each Receipt this Period

375.00

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

1075.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Eric Sichel

Mailing Address 411 Highview Road

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Investment Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21137

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Eric Sichel

Mailing Address 411 Highview Road

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Investment Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21268

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Morris Sinensky

Mailing Address 1140 Trafalgar Street

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.21278

Amount of Each Receipt this Period

325.00

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

700.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 72

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Barry Sklar

Mailing Address 95 Norfolk St.

City

Bergenfield

State

NJ

Zip Code

07621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bankers TrustOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.20933

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Karen Stahl-Don

Mailing Address 2600 Netherland Ave.  
Apt.815

City

Bronx

State

NY

Zip Code

10463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.21415

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

David Stein

Mailing Address 132 S Adelaide Ave.

City

Highland Park

State

NJ

Zip Code

08904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Merrill LynchOccupation  
IT Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	8

Transaction ID: SA11AI.21008

Amount of Each Receipt this Period

250.00

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

5375.00

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



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 72

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

David Steinberg

Mailing Address 70-30 137 St.

City

Flushing

State

NY

Zip Code

11367

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Mortgage Broker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	8

Transaction ID: SA11AI.21124

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Ronnie Stern

Mailing Address 514 Maitland Ave.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wythe Upholstery Co.

Occupation

Furniture

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.21338

Amount of Each Receipt this Period

425.00

**C.**

Full Name (Last, First, Middle Initial)

Daniel E. Straus

Mailing Address 351 Hillcrest Road

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

investor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.21349

Amount of Each Receipt this Period

1000.00

check to Reed Committee

[MEMO ITEM]

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

500.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Justin Straus

Mailing Address 122 Golf Court

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oradell Animal Hospital

Occupation  
Veterinarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21081

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Henry Strauss

Mailing Address 7731 Park Drive East

City

Flushing

State

NY

Zip Code

11367

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYU

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.21057

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Burton Surick

Mailing Address 420 Acorn Dr.

City

Paramus

State

NJ

Zip Code

07652

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Beth Israel Med Ctr

Occupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.21074

Amount of Each Receipt this Period

275.00

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

775.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Howard Tepper

Mailing Address 844 Grange Rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mt. Sinai Hospital

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21028

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Bruce Weinrib

Mailing Address 822 Downing St.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ernst & Young

Occupation

Accountant/Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.21324

Amount of Each Receipt this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)

Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City

Edison

State

NJ

Zip Code

08820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.20867

Amount of Each Receipt this Period

100.00

In-kind - fax service

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

975.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
 David Weinstock

Mailing Address 253 Broadway

City State Zip Code  
 Lynbrook NY 11563

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Lynbrook Cardiology

Occupation  
 MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.20914

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
 Mark Wertenteil

Mailing Address 296 Rutland Avenue

City State Zip Code  
 Teaneck NJ 07666

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 self

Occupation  
 physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.21056

Amount of Each Receipt this Period

1125.00

**C.**

Full Name (Last, First, Middle Initial)  
 Mark Wiesen

Mailing Address 668 North Forest Drive

City State Zip Code  
 Teaneck NJ 07666

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self

Occupation  
 Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.21105

Amount of Each Receipt this Period

1200.00

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

2575.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Barry Wolf

Mailing Address 128 N. 8th Ave

City

Highland Park

State

NJ

Zip Code

08904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.20984

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Steven Wruble

Mailing Address 614 maitland Ave.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Psychiatrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.21018

Amount of Each Receipt this Period

225.00

**C.**

Full Name (Last, First, Middle Initial)

Barbara Yaros

Mailing Address 910 Prince St

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Reckitt Benckiser

Occupation  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.20976

Amount of Each Receipt this Period

300.00

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

625.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

David Zaslowky

Mailing Address 31 White Drive

City

Cedarhurst

State

NY

Zip Code

11516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baker & McKenzie

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.20981

Amount of Each Receipt this Period

275.00

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

275.00

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

63450.00

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

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

FOR LINE NUMBER: PAGE 55 / 72

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Valley National Bank

Mailing Address 1445 Valley Rd

City

Wayne

State

NJ

Zip Code

07470

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5359.49

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA17.20866

Amount of Each Receipt this Period

748.98

cd interest income

**B.**

Full Name (Last, First, Middle Initial)

Valley National Bank

Mailing Address 1445 Valley Rd

City

Wayne

State

NJ

Zip Code

07470

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5383.69

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA17.20870

Amount of Each Receipt this Period

24.20

interest income

**C.**

Full Name (Last, First, Middle Initial)

Valley National Bank

Mailing Address 1445 Valley Rd

City

Wayne

State

NJ

Zip Code

07470

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5515.87

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA17.20871

Amount of Each Receipt this Period

132.18

sweep account interest in-  
come

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

905.36

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

905.36

# **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 56 / 72

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

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
5 Towns Jewish Times

Mailing Address PO Box 690

City State Zip Code  
Lawrence NY 11559

Purpose of Disbursement  
ad - Mission 2008

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.20884

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)  
Internal Revenue Service

Mailing Address N/A

City State Zip Code  
Ogden UT 84201

Purpose of Disbursement  
Form 1120-POL tax year 2007

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.20873

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5819.45

**C.**

Full Name (Last, First, Middle Initial)  
NJ Jewish Media Group

Mailing Address 1086 Teaneck Rd.

City State Zip Code  
Teaneck NJ 07666

Purpose of Disbursement  
Ad - Mission 2008

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.20880

Date of Disbursement

/   /

Amount of Each Disbursement this Period

471.90

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

6691.35

**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)

PAGE 57 / 72

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

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
NJ Jewish News

Mailing Address 901 Route 10

City Whippany State NJ Zip Code 07981

Purpose of Disbursement  
ad - Mission 2008

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20885

Date of Disbursement

/   /

Amount of Each Disbursement this Period

690.00

B.

Full Name (Last, First, Middle Initial)  
Oxford Health Plans NJ, Inc.

Mailing Address PO Box 1697

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
health insur - Davidson

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20888

Date of Disbursement

/   /

Amount of Each Disbursement this Period

485.51

C.

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
payroll - Davidson

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1339.96

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

2515.47

**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)

PAGE 58 / 72

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

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
payroll - Nunez

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20875

Date of Disbursement

/   /

Amount of Each Disbursement this Period

395.67

B.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20876

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1047.62

C.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
service charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20881

Date of Disbursement

/   /

Amount of Each Disbursement this Period

112.57

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

1555.86

**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)

PAGE 59 / 72

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

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> SB21B.20882 <b>Date of Disbursement</b>																				
Mailing Address 1551 S. Washington Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	8												
City Piscataway State NJ Zip Code 08854	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement payroll - Wolkowitz Candidate Name	<table border="1"> <tr> <td colspan="10">795.33</td> </tr> </table>	795.33																			
795.33																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> SB21B.20891 <b>Date of Disbursement</b>																				
Mailing Address 1551 S. Washington Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	0		2	0	0	8												
City Piscataway State NJ Zip Code 08854	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement payroll - Davidson Candidate Name	<table border="1"> <tr> <td colspan="10">1339.96</td> </tr> </table>	1339.96																			
1339.96																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> SB21B.20892 <b>Date of Disbursement</b>																				
Mailing Address 1551 S. Washington Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	1		2	0	0	8												
City Piscataway State NJ Zip Code 08854	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement taxes Candidate Name	<table border="1"> <tr> <td colspan="10">556.97</td> </tr> </table>	556.97																			
556.97																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

**2692.26**

**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)

PAGE 60 / 72

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

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
paypal

Mailing Address PO Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement  
processing fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20865

Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

1642.01

B.

Full Name (Last, First, Middle Initial)  
Rockaway BP

Mailing Address 51 Hibernia Ave

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement  
Expenses after reaching \$200 in '08

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.21390

Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

58.97

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Total Event Asu International Inc

Mailing Address 500 Unicorn Park Dr

City Woburn State MA Zip Code 01801

Purpose of Disbursement  
Event Liability Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.21391

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

260.59

[MEMO ITEM]

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

1642.01

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)

PAGE 61 / 72

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

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Triangle Exxon

Mailing Address 2151 Lemoine Ave

City State Zip Code  
Fort Lee NJ 07024

Purpose of Disbursement  
gas expenses March

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.21389

Date of Disbursement

/   /

Amount of Each Disbursement this Period

144.27

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code  
Wayne NJ 07470

Purpose of Disbursement  
Chouake - credit card payment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20886

Date of Disbursement

/   /

Amount of Each Disbursement this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code  
Wayne NJ 07470

Purpose of Disbursement  
Davidson - credit card payment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.20893

Date of Disbursement

/   /

Amount of Each Disbursement this Period

477.07

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

519.57

**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)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code  
Wayne NJ 07470

Purpose of Disbursement  
credit card processing fee  
Candidate Name

Category/  
Type

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

Transaction ID: SB21B.20869

Date of Disbursement

/   /

Amount of Each Disbursement this Period

269.49

B.

Full Name (Last, First, Middle Initial)  
Verizon wireless

Mailing Address PO Box 17120

City State Zip Code  
Tucson AZ 85731

Purpose of Disbursement  
phone service  
Candidate Name

Category/  
Type

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

Transaction ID: SB21B.20894

Date of Disbursement

/   /

Amount of Each Disbursement this Period

101.84

C.

Full Name (Last, First, Middle Initial)  
Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code  
Edison NJ 08820

Purpose of Disbursement  
In-kind - fax service  
Candidate Name

Category/  
Type

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

Transaction ID: SB21B.20868

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

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

471.33

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

16087.85

# **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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement

Candidate Name  
SHELLEY BERKLEY

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NV District: 01

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.20904

Date of Disbursement

03 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)  
FRIENDS OF MARK WARNER

Mailing Address 1029 NORTH ROYAL STREET 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name  
MARK ROBERT WARNER

Office Sought: ☐ House  
☒ Senate  
☐ President

State: VA District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21340

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)  
FRIENDS OF MARK WARNER

Mailing Address 1029 NORTH ROYAL STREET 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
credit card from Ben Chouake

Candidate Name  
MARK ROBERT WARNER

Office Sought: ☐ House  
☒ Senate  
☐ President

State: VA District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21374

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]

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

6000.00

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
FRIENDS OF MARK WARNER

Mailing Address 1029 NORTH ROYAL STREET 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
credit card from Joshua Landes

Candidate Name  
MARK ROBERT WARNER

Office Sought: ☐ House  
☒ Senate  
☐ President

State: VA District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21375

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
FRIENDS OF MARK WARNER

Mailing Address 1029 NORTH ROYAL STREET 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
check from Jack Halpern

Candidate Name  
MARK ROBERT WARNER

Office Sought: ☐ House  
☒ Senate  
☐ President

State: VA District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21376

Date of Disbursement

03 / 09 / 2008

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
FRIENDS OF MARY LANDRIEU INC

Mailing Address 650 POYDRAS ST  
SUITE 1434

City NEW ORLEANS State LA Zip Code 70130

Purpose of Disbursement

Candidate Name  
MARY L LANDRIEU

Office Sought: ☐ House  
☒ Senate  
☐ President

State: LA District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.20901

Date of Disbursement

03 / 19 / 2008

Amount of Each Disbursement this Period

5000.00

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

5000.00

**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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
GARRETT FOR CONGRESS

Mailing Address 100 POND SCHOOL ROAD

City SUSSEX State NJ Zip Code 07461

Purpose of Disbursement  
check from Drew Parker

Candidate Name  
E SCOTT GARRETT

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NJ District: 05

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21346

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
GARRETT FOR CONGRESS

Mailing Address 100 POND SCHOOL ROAD

City SUSSEX State NJ Zip Code 07461

Purpose of Disbursement  
check from Leon Kozak

Candidate Name  
E SCOTT GARRETT

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NJ District: 05

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21345

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

750.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
GARRETT FOR CONGRESS

Mailing Address 100 POND SCHOOL ROAD

City SUSSEX State NJ Zip Code 07461

Purpose of Disbursement

Candidate Name  
E SCOTT GARRETT

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NJ District: 05

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.20902

Date of Disbursement

03 / 27 / 2008

Amount of Each Disbursement this Period

2000.00

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

2000.00

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)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) JOHN MCCAIN 2008 INC.	<b>Transaction ID:</b> SB23.21384 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 16118	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	0		2	0	0	8												
City ARLINGTON State VA Zip Code 22215	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement check from Felix Glaubach	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name JOHN S MCCAIN	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	<b>[MEMO ITEM]</b>																				

  

<b>B.</b> Full Name (Last, First, Middle Initial) JOHN MCCAIN 2008 INC.	<b>Transaction ID:</b> SB23.21385 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 16118	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	0		2	0	0	8												
City ARLINGTON State VA Zip Code 22215	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement check from Felix Glaubach	<table border="1"> <tr> <td colspan="10">1300.00</td> </tr> </table>	1300.00																			
1300.00																					
Candidate Name JOHN S MCCAIN	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	<b>[MEMO ITEM]</b>																				

  

<b>C.</b> Full Name (Last, First, Middle Initial) JOHN MCCAIN 2008 INC.	<b>Transaction ID:</b> SB23.21386 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 16118	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	0		2	0	0	8												
City ARLINGTON State VA Zip Code 22215	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement check from Robert ottesman	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name JOHN S MCCAIN	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	<b>[MEMO ITEM]</b>																				

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

0.00

**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)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
JOHN MCCAIN 2008 INC.

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement  
check from Miriam Glaubach

Candidate Name  
JOHN S MCCAIN

Office Sought: ☐ House  
☐ Senate  
☒ President

State: District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21387

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

2300.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
JOHN MCCAIN 2008 INC.

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement  
check from Miriam Glaubach

Candidate Name  
JOHN S MCCAIN

Office Sought: ☐ House  
☐ Senate  
☒ President

State: District: 00

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21388

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

2500.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement  
check from Rosalyn Kozak

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21363

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

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

0.00

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code  
GREAT BEND KS 67530

Purpose of Disbursement  
check from Deborah Berger

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21364

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code  
GREAT BEND KS 67530

Purpose of Disbursement  
credit card from Kevin Lemmer

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21365

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code  
GREAT BEND KS 67530

Purpose of Disbursement

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.20897

Date of Disbursement

03 / 12 / 2008

Amount of Each Disbursement this Period

5000.00

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

5000.00

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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code  
GREAT BEND KS 67530

Purpose of Disbursement  
check from John Lipowski

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21366

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code  
GREAT BEND KS 67530

Purpose of Disbursement  
credit card from Mort Fridman

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21367

Date of Disbursement

03 / 19 / 2008

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code  
GREAT BEND KS 67530

Purpose of Disbursement  
check from Nathan Lindenbaum

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21368

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

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

0.00

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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code  
GREAT BEND KS 67530

Purpose of Disbursement  
check from Joshua Muss

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21369

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code  
GREAT BEND KS 67530

Purpose of Disbursement  
check from Jason Muss

Candidate Name  
PAT ROBERTS

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KS District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21370

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
REED COMMITTEE

Mailing Address PO BOX 8628

City State Zip Code  
CRANSTON RI 02920

Purpose of Disbursement

Candidate Name  
JACK REED

Office Sought: ☐ House  
☒ Senate  
☐ President

State: RI District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.20900

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

5000.00

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

5000.00

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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
REED COMMITTEE

Mailing Address PO BOX 8628

City CRANSTON State RI Zip Code 02920

Purpose of Disbursement  
check from Daniel Straus

Candidate Name  
JACK REED

Office Sought: ☐ House  
☒ Senate  
☐ President

State: RI District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21352

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
REED COMMITTEE

Mailing Address PO BOX 8628

City CRANSTON State RI Zip Code 02920

Purpose of Disbursement  
check from Herbert Seif

Candidate Name  
JACK REED

Office Sought: ☐ House  
☒ Senate  
☐ President

State: RI District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21351

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

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

0.00

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

23000.00

**Image# 28931476329**

Form/Schedule: **SA11AI**      The addition of Karen Stahl-Don's contribution amends the report filed on 4/20/08.

Transaction ID: **SA11AI.21415**

Form/Schedule: **SB23**      Mailed original contribution to McCain campaign with letter stating that: \$200 must be refunded to Dr. Miriam  
Transaction ID: **SB23.21388** Glaubach -- the amount she will be over her limit with her donation of \$4,800.

\*\*\*\*\*