

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

SECRETARY OF THE SENATE
14 MAY 30 PM 2:44
Office Use Only

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

12FE4M5

SABRIN FOR SENATE 2014

ADDRESS (number and street)

109 MERCER ST

Check if different than previously reported. (ACC)

HIGHTSTOWN

NJ

08520

2. FEC IDENTIFICATION NUMBER ▼

C C00557447

CITY ▲ STATE ▲ ZIP CODE ▲
STATE ▼ DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A)
NJ 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on 06 / 03 / 2014 in the State of NJ

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

04 / 01 / 2014 through 05 / 14 / 2014

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 Neil Schloss CPA

Signature of Treasurer Neil Schloss CPA

Date

05 / 27 / 2014

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 3
(Revised 02/2003)

14020404260

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 13

Write or Type Committee Name

SABRIN FOR SENATE 2014

Report Covering the Period: From:

MM / DD / YYYY
04 / 01 / 2014

To:

MM / DD / YYYY
05 / 14 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	6210.00	45852.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	6210.00	45852.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	27053.90	33981.28
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	27053.90	33981.28
8. Cash on Hand at Close of Reporting Period (from Line 27)...	21870.72	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...	10000.00	

For further information contact:

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

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

14020404261

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

SABRIN FOR SENATE 2014

Report Covering the Period: From:

MM / DD / YYYY
04 / 01 / 2014

To:

MM / DD / YYYY
05 / 14 / 2014

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

4050.00

40598.00

(ii) Unitemized

2160.00

5254.00

(iii) TOTAL of contributions from individuals ..

6210.00

45852.00

(b) Political Party Committees...

0.00

0.00

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

0.00

0.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

6210.00

45852.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

0.00

10000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

10000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

6210.00

55852.00

14020404262

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	27053.90	33981.28
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	27053.90	33981.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	42714.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	6210.00
25. SUBTOTAL (add Line 23 and Line 24)...	48924.62
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	27053.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	21870.72

14020404263

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

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

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)
SABRIN FOR SENATE 2014

Full Name (Last, First, Middle Initial) Nathan Borochov			Date of Receipt MM / DD / YYYY 05 / 09 / 2014		
Mailing Address 1500 Palisade Avenue			Transaction ID : SA11AI.5095		
City Fort Lee	State NJ	Zip Code 07024	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Name of Employer Optician			
Occupation Optician		Election Cycle-to-Date 500.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) Victor Casas			Date of Receipt MM / DD / YYYY 05 / 03 / 2014		
Mailing Address 3 Telegraph Hill Road			Transaction ID : SA11AI.5074		
City Holmdel	State NJ	Zip Code 07733	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Name of Employer Central Jersey Pathology			
Occupation Pathologist		Election Cycle-to-Date 300.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) James D'Agostino			Date of Receipt MM / DD / YYYY 05 / 09 / 2014		
Mailing Address 900 Laurie Lane			Transaction ID : SA11AI.5076		
City Franklin Lakes	State NJ	Zip Code 07417	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Name of Employer JD Companies			
Occupation Builder/developer		Election Cycle-to-Date 2500.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

14020404264

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 13	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SABRIN FOR SENATE 2014

A. Full Name (Last, First, Middle Initial)
Daniel D'Aquila

Mailing Address **1500 Pallsades Avenue**

City Fort Lee	State NJ	Zip Code 07024
-------------------------	--------------------	--------------------------

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

Name of Employer Self-Employed	Occupation Construction
--	-----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM	DD	YYYY
05	09	2014

Transaction ID : **SA11AI.5098**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank Di Pentima

Mailing Address **6 Mountain Lakes Rd**

City Oakland	State NJ	Zip Code 07436
------------------------	--------------------	--------------------------

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

Name of Employer Pearson	Occupation Finance Director
------------------------------------	---------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM	DD	YYYY
05	12	2014

Transaction ID : **SA11AI.5073**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Philip Gibbs

Mailing Address **231 Fellowship Road**

City Moorestown	State NJ	Zip Code 08057
---------------------------	--------------------	--------------------------

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

Name of Employer N/A	Occupation N/A
--------------------------------	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM	DD	YYYY
04	04	2014

Transaction ID : **SA11AI.5077**

Amount of Each Receipt this Period
250.00

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

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

1000.00

14020404265

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
SABRIN FOR SENATE 2014

Full Name (Last, First, Middle Initial) A. Fran Hackett		Date of Receipt MM / DD / YYYY 05 / 08 / 2014
Mailing Address 1111 Clinton Terrace		Transaction ID : SA11AI.5075
City South Plainfield	State NJ	Zip Code 07080
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer N/A	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Peter Humphris		Date of Receipt MM / DD / YYYY 05 / 12 / 2014
Mailing Address 14 Manassas Drive		Transaction ID : SA11AI.5100
City Toms River	State NJ	Zip Code 08757
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Dwight Johnson		Date of Receipt MM / DD / YYYY 05 / 05 / 2014
Mailing Address 143 Mansfield Blvd N		Transaction ID : SA11AI.5072
City Cherry Hill	State NJ	Zip Code 08034
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Pennsylvania Real Estate Investment Tr	Occupation software engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	4050.00

14020404266

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 13			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SABRIN FOR SENATE 2014

Full Name (Last, First, Middle Initial) A. Baseline Research			Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 11 Stoney Hill Road			Amount of Each Disbursement this Period 975.00 Transaction ID : SB17.5128
City New Hope	State PA	Zip Code 18938	
Purpose of Disbursement		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. Brazer & Littell			Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address PO Box 527			Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.5118
City Lebanon	State NJ	Zip Code 08833	
Purpose of Disbursement		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. Louis Crescitelli III			Date of Disbursement MM / DD / YYYY 04 / 23 / 2014
Mailing Address 40 Church Street			Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5125
City Franklin	State NJ	Zip Code 07416	
Purpose of Disbursement		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	4975.00
TOTAL This Period (last page this line number only).....	

14020404267

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 13			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SABRIN FOR SENATE 2014

Full Name (Last, First, Middle Initial) A. Gallco Media LLC		Date of Disbursement
Mailing Address PO Box 67		M M / D D / Y Y Y Y 04 / 21 / 2014
City	State	Amount of Each Disbursement this Period
Bedford	NJ	
Zip Code	07718	600.00
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5106
	004	
Candidate Name	Office Sought:	
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Kelly Ann Hart		Date of Disbursement
Mailing Address 47 Fox Tail Lane		M M / D D / Y Y Y Y 04 / 16 / 2014
City	State	Amount of Each Disbursement this Period
Hamburg	NJ	
Zip Code	07419	5535.50
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5123
	001	
Candidate Name	Office Sought:	
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Virginia Littell		Date of Disbursement
Mailing Address PO Box 527		M M / D D / Y Y Y Y 04 / 09 / 2014
City	State	Amount of Each Disbursement this Period
Lebanon	NJ	
Zip Code	08833	590.00
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5121
	001	
Candidate Name	Office Sought:	
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	6725.50
TOTAL This Period (last page this line number only)	

14020404268

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
SABRIN FOR SENATE 2014

Full Name (Last, First, Middle Initial) A. Charles Measley		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address PO Box 127		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.5110
City Rumson	State NJ	
Purpose of Disbursement		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. New Jersey Right to Life		Date of Disbursement MM / DD / YYYY 05 / 09 / 2014
Mailing Address PO Box 52		Amount of Each Disbursement this Period 410.00 Transaction ID : SB17.5144
City Morristown	State NJ	
Purpose of Disbursement		004
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Parkway Printing		Date of Disbursement MM / DD / YYYY 04 / 23 / 2014
Mailing Address 52 N Main St		Amount of Each Disbursement this Period 235.40 Transaction ID : SB17.5134
City Marlboro	State NJ	
Purpose of Disbursement		006
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

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

3245.40

14020404269

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 13
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (in Full)
SABRIN FOR SENATE 2014

Full Name (Last, First, Middle Initial) A. Parkway Printing		Date of Disbursement
Mailing Address 52 N Main St		MM / DD / YYYY 04 / 23 / 2014
City Marlboro	State NJ	Zip Code 07746
Purpose of Disbursement	Category/ Type 006	Amount of Each Disbursement this Period 1086.05
Candidate Name	Transaction ID : SB17.5135	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement
Mailing Address 144 2nd St. 1st Floor		MM / DD / YYYY 04 / 30 / 2014
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement	Category/ Type 003	Amount of Each Disbursement this Period 25.88
Candidate Name	Transaction ID : SB17.5138	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Save Jersey Advertising		Date of Disbursement
Mailing Address 313 White Horse Pike		MM / DD / YYYY 04 / 01 / 2014
City Haddon Heights	State NJ	Zip Code 08035
Purpose of Disbursement	Category/ Type 004	Amount of Each Disbursement this Period 1250.00
Candidate Name	Transaction ID : SB17.5103	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2361.93
TOTAL This Period (last page this line number only).....	

14020404270

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 13
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SABRIN FOR SENATE 2014

Full Name (Last, First, Middle Initial) A. Scott St. Clair		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 108 Crest Dr		Amount of Each Disbursement this Period 3622.73
City Belleville	State NJ	
Purpose of Disbursement	Category/ Type 001	Transaction ID : SB17.5113
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Scott St. Clair		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 108 Crest Dr		Amount of Each Disbursement this Period 3707.79
City Belleville	State NJ	
Purpose of Disbursement	Category/ Type 001	Transaction ID : SB17.5116
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Traz Group		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 1940.00
City Medford	State NJ	
Purpose of Disbursement	Category/ Type 001	Transaction ID : SB17.5130
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9270.52
TOTAL This Period (last page this line number only).....	26578.35

14020404271

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

SABRIN FOR SENATE 2014

Transaction ID : SC/10.4101

LOAN SOURCE Full Name (Last, First, Middle Initial)

MURRAY SABRIN

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1500 PALISADE AVE APT 2F

City State ZIP Code
FORT LEE NJ 07024

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS

Date Incurred 03 / 11 / 2014	Date Due 04/11/2014	Interest Rate 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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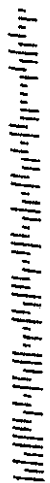
List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	10000.00
TOTALS This Period (last page in this line only) ..	▶	10000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020404272



Sabrin for Senate 2014
109 Mercer Street
Highstown, NJ 08520

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL™



7014 0150 0001 7280 3764

Office of Public Records
P.O. Box 77578
Washington DC 20013-8578

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POST OFFICE**

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NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

STATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-71
PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____ Date of Receipt

USPS FIRST CLASS MAIL _____ Postmark

USPS REGISTERED/CERTIFIED _____ Postmark **5/27/14**

USPS PRIORITY MAIL _____ Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____ Postmark

OVERNIGHT DELIVERY SERVICE: SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

- FEDERAL EXPRESS _____
- UPS _____
- DEL _____
- AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____ Date of Receipt

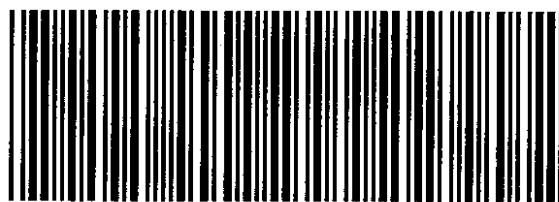
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____ Date of Receipt

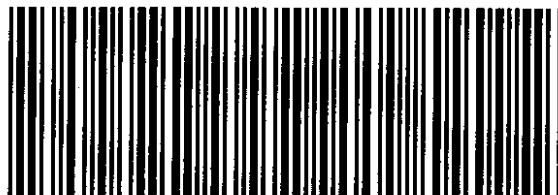
OTHER _____ Date of Receipt or Postmark

PREPARER **DH** DATE PREPARED **5-30-14**

14020404274



SEN PATCH



SEN PATCH

14020404275